U.S. Naval Hospital Great Lakes
Historical Scrapbook Index
1911-1953

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004 Recruits are Inspected During Detention Period. Fence is Next to Sheridan Road. 1918.
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006 Recruits Proudly Show Their Smallpox Vaccination. They Also Received a Typhoid Shot and a Chick Test to Determine Immunity to Diphtheria and a Throat Culture to Identify Carriers of Cerebra-Spinal Fever.
007 Typed Page, Historical Information About Number of Patients with Spanish Flu and Pneumonia Being Treated at the Great Lakes Naval Hospital August through October 1918.
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010 A Group of Hospital Corpsmen Eating Dinner in One of the Subsistence Units of the Hospital Group.
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016 Typed Page, Historical Information About Service Schools at Great Lakes in 1918.
017 Great Lakes Sailors Line the Main Road Leading to Ross Field Awaiting the Arrival of the Secretary of the Treasury.
018 Newspaper article, paper unknown, 12, February, 1943, Great Lakes Wounded Tell of Epic U.S. Naval Battles.
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020 Newspaper article, Chicago Herald American, 18, February, 1943, Pearl Harbor Heroine.
021 Newspaper article, Chicago Herald American, 18, February, 1943, Gives His Buddy a Harder Clip.
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023 Newspaper article, Chicago Herald American, 18, February, 1943, Milwaukeean.
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025 Newspaper article, Chicago Herald American, 18, February,1943,Casablanca.
026 Thirty-Five Thousand Great Lakes Sailors Part of the Youth of the Great Middle West, En Masse.
027 Galaxy of Former "Big Leaguers.".
028 Typed Page, Historical Information About Regimental Dispensaries.
029 Typed Page, Historical Information About Recreation at Great Lakes. Circa 1918.
030 Untitled and Undated Picture.
031 Newspaper article, Unknown Paper, Not Dated, Jim Dykes and Some of His White Sox Ball Players Visited Patients in Wards before Game with Great Lakes Team, 7, August, 1944.
032 Newspaper article, Unknown Paper, Not Dated, Fun for 1,400 Sufferers at Great Lakes.
033 Newspaper article, Unknown Paper, Not Dated, Diaper Changing Race.
034 Newspaper article, Unknown Paper, Not Dated, A Whale of a Difference a Few Laughs Can Make.
035 Newspaper article, Unknown Paper, Not Dated, Bashful Sailor.
036 Untitled and Undated Picture of Medal Being Pinned on a Marine.
037 MRS W.J. Stellman and MRS Paul K. Burke, Two of the Hospital's Well Known Gray Ladies, Assist PFC Marvin Holschbach, USMC, in Making an Easter Greeting Record to Send to His Family.
038 Newspaper article, Unknown Paper, Undated, Gray Ladies Came to Great Lakes in 1943, Work Has Been Valuable.
038a Continuation of Newspaper article, Gray Ladies.
039 The Hospital Float Participated in the Navy Day Parade in Chicago on 27, October, 1944, and Won First Prize in the Parade.
040 Occupational Therapy on the Wards.
041 Untitled and Undated Picture of a Medal Being Pinned on a Marine.
042 Newspaper article, Herald American, 19, December, 1944, Special Guests.
042a Title for Newspaper article, Special Guests.

043 Newspaper article, Herald American, 19, December, 1944, Head Brace.
044 Kenneth Kelley, Kirkwood, Illinois, Receives Purple Heart Award, Injured in South Pacific Circa 1944.
045 Purple Heart Cruise Bring Day of Fun for Blue Jackets.
046 Newspaper article, Great Lakes Bulletin, 12, May, 1944, Hospital Prescribes Fun as Well as Medicine.
046a Continuation of Newspaper article, Great Lakes Bulletin, 12, May, 1944, Hospital Prescribes Fun as Well as Medicine.
047 Newspaper article, Great Lakes Bulletin, 12, May, 1944, Hospital's Outdoor MAA's Force Does Grand Job on Tough Detail.
047a Continuation of Newspaper article, Great Lakes Bulletin, 12, May, 1944, Hospital's Outdoor MAA's Force Does Grand Job on Tough Detail.
048 Visit of Surgeon General, 4, September, 1950.
048a Title for Visit of Surgeon General, Rear Admiral C.A. Swanson, MC, USN,Captain T. F. Cooper, MC, USN. Second Row: (Left to Right.) Commander H.T. Stradford, MC, USN, Captain E.S. Lowe, MC, USN, Captain C.C. Shaw, MC, USN.
049 Newspaper article, Unknown paper and dates, Freed Marine Tells of Life as Reds Prisoner.
049a Continuation of Newspaper article, Freed Marine
049b Continuation of Newspaper article, Freed Marine.
050 Picture that Goes With Newspaper article, Freed Marine.
051 Twenty One Corpsmen Honored for Korean Duty.
052 Picture that Goes With Newspaper article Twenty One Corpsmen Honored.
053 Good Food is a Wonderful Change, 18, September, 1952.
054 LCDR Frank M. Graf, Catholic Chaplain, Administers Holy Communion.
055 Newspaper article, Unknown paper and date, LT Fix and Staff Receive Recruits Donation; Use New Developments.
055a Continuation of Newspaper article, LT Fix.
056 Maxine Vader, HM1, Prepares to Take Blood From a Recruit Volunteer.
057 For Better Health, LTJG Myrtle Butt, NC, USN, Supervises Work of a Patient Undergoing Treatment in the Occupational Therapy Department of the Naval Hospital.
058 Newspaper article, Unknown paper and Date, Red Cross "Covers" Hospital on a 24-Hour Service Basis.
058a Continuation of Newspaper article, Red Cross Covers Hospital.
059 In-Service Program Refreshes Hospital Corpsmen.
060 Carol Channing, Star of "Gentle Prefer Blondes." Poses with a Group of Staff Members and Patients of the Hospital, 12, December, 1951. – Korea

Veterans Presented Purple Hearts, 10, February, 1951. – Two Untitled and Undated Pictures.

061 Twelve Hospital Corpsmen Headed by Ensign Jack Gehring, MSC, USN, Were Flown from the Naval Air Station Glenview, Illinois, on 8 August, 1952, to Sioux City, Iowa to Help in that Areas Polio Epidemic. Secretary of the Navy, Dana Kimball, Ordered the Group to Sioux City. The Plea for Navy Aid was Sent Through Congressional Channels. – Building 68, Large Brick Garage on Which Construction was Started 7, February, 1942, and Completed About 16, June, 1942 and Put to Use 30, June, 1942. Its Dimensions are 168 Feet Long by 60 Feet Wide by 25 Feet 5 inches High With Living Quarters Provided Above for Civilians Assigned to the Transportation Department. – Parking Lot of 67 Spaces Next to the Gate House Which Accommodates Cars of Personnel Parking or Quartered in Surrounding Buildings as Well as Space for Visitors. – Maintenance Building 59. The Shops in this Building Were Moved There in 1940 and Greatly Increased the Efficiency of the Maintenance Department. This One-Story Building Originally Housed the Medical Store-Room and Was Built in 1928. It is 100 Feet Long and 40 Feet Wide.

062 Bridge Over the Ravine, this is Looking Toward the Hospital Gate on "D" Street. Construction Was Started on 5, November, 1942, and Work Was Completed on this Bridge, 1, April, 1943. – Views of Wards 73 North and South and 74 North and South Which Face Sixth Street. Work on These Buildings Was Started on 30, December, 1941, and Completed About, 15, April, 1942. – Approaching the U.S. Naval Hospital, Great Lakes, Illinois, on U.S. Highway #42.

063 Quarters C of the Executive Officer, U.S. Naval Hospital, Great Lakes, Illinois, Constructed in 1909, with the Sun Porch Extension Made in 1928,it is Now 72 Feet, 7 ½ Inches Long by 39 Feet Wide and 36 Feet High.

064 Work Commenced on 19, February, 1942 on the Brick Officers Quarters, H, I, J, K, L, M, N, O, P, and Q and this Apartment House Style Building Was Completed, 30, July, 1942. These Quarters were Completely Occupied for the First Time During The Month of January, 1943. The Dimensions are 45 Feet 6 Inches Long by 23 Feet 6 Inches Wide by 28 Feet High Each.

065 View of Wards 92 North and South, 93 North and South, and 94 North and South From the Bridge on "D" Street. The Dimensions of the Wards are 200 Feet Long by 28 Feet Wide and They are One-Story Buildings. The Normal Capacity is Considered to be 28 With an Additional 5 Beds in Quiet Rooms Making a Total of 33 Beds.

066 View of “F” Street Looking East From Eighth Street. Ward 65 South is the Near Left, While Barracks 66 is Shown to the Near Right.
067 Newspaper article, Operating Room Team Takes Every Precaution.
067a Continuation of Newspaper article, Operating Room Team.
067b Continuation of Newspaper article, Operating Room Team.
068 Newspaper article, Naval Hospital Clinical Laboratory is Vital Link in Medical Chain.
069 Newspaper article, X-Ray Technician Dave Linberg, HM3.
070 Newspaper article, Hospital’s Medical Repair Unit Only One in Ninth Naval District
071 Newspaper article, 24,698 Examined by X-Ray at Hospital Past Year.
072 Newspaper article, Physio Therapists Treat 65 Patients at Naval Hospital.
073 Newspaper article, Brain Electricity Measured as Key to Mental Illness.
074 Newspaper articles, Naval Hospital’s Large Pharmacy Compares with City Drug Store. – Doctor is First Wave to Take Internship Here.
075 Newspaper article, Great Lakes Bulletin, 3,m August, 1951, More Liberty to Corpsmen.
076 Waves Barracks 104H is a Two Story Building 168 Feet Long by 100 Feet Wide Completed 11, January, 1942, and Occupied in February. This Building Was Used Originally by the Hospital Corps School and For Staff Corpsmen. Conversion to Wave Barracks was Completed During April – June 1945.It has Been Occupied by Waves Since About August of That Year.
077 Maxine Vader, HM1, was Commended for Outstanding Duty, Captain D.W. Lyon, Also Awarded a Bronze Star Medal and Citation to Frank J. Dyboski, EMC (Khaki Uniform) at This Ceremony.
078 Recreation Room, Building 66, Corpsmen Quarters.
079 Barracks 67, Hospital Corpsmen Quarters was Started on 15, December, 1941, and Was Completed on 28, March, 1942. This Building is Located on Eighth Street Next to “G” Street and is Directly Across From Barracks 66.
080 Naval Hospital Eleven-Man-Squad.
081 Newspaper article, Hospital Football Schedule.
082 Newspaper article, Building 80 is Scene of Hospital Ward Ping-Pong Finals.
083 Newspaper article, Hospital Softball Squad Turn Out for First Practice.
084 Scene From the Game Between USNTC and USNH, Great Lakes, Illinois, Played in the Gymnasium Building 8C on Tuesday Evening, 10, January, 1950.
085 Newspaper article, Afternoon Game to Open Season for Corpsmen.

086 Picture of the Gymnasium Before it Was Modernized.
087 Building 82 Faces Fifth Street and is Bordered on the Right by "B" Street and on the Left by "D" Street.
088 Picture of Hospital Music Room.
089 Hospital Music Room is Source of Entertainment.
090 Newspaper article, Great Lakes Bulletin, Hospital Gauzette, Chez Paree Show at the Theater in Building 82.
091 Picture of Chez Paree Show in Progress.
092 Newspaper article, Hospital Opens Special Theater.
093 Auditorium Recently Modernized by the Benjamin Chemars Company. The Project was Begun, 1, November 1948 and it Was Re-Commissioned in Ceremonies Held on, 8, March, 1949.
094 Accommodations for Crutch and Wheel Chair Patients at the New Theater in Building 82.
095 The Library in Building 82.
096 Newspaper article, Hospital Cagers Lose to Glenview.
097 Newspaper article, Hospital Tops NAS Olathe Cagers; Throws Center into Ninth Naval District Loop Tie.
098 Newspaper article, Sports Fans Find Facilities Four-O at Naval Hospital.
099 Newspaper article, Some of the Starters.
100 U.S. Naval Hospital, Great Lakes, Illinois, Data Concerning Hospital at Present, September, 1953.
101 U.S. Naval Hospital, Great Lakes, Illinois, Personnel Data, September, 1953.
102 U.S. Naval Hospital, Great Lakes, Illinois, Pertinent Statistical Data, Average Census, September, 1953.
103 Address Given by I.L.V. Norman, MC, USN, Commanding Officer Upon Visit of Secretary of the Navy, Robert E. Anderson on 25, September, 1953.
104 Typed Information about Address Given at SECNAV Visit on 25, September, 1953.
105 Continuation of Typed Information on SECNAV Visit.
106 Continuation of Typed Information on SECNAV Visit.
107 Continuation of Typed Information on SECNAV Visit
108 Continuation of Typed Information on SECNAV Visit.
109 Typed Sheet About Intern Training, 31, December, 1951.
109a Continuation of Typed Sheet About Intern Training, 31, December, 1951.
110 Newspaper article, Staff and Patients Fed by Civilian Commissary Department.

110a Continuation of Newspaper article, Staff and Patients Fed by Civilian Commissary Department.
111 View of Special Diets Kitchen.
112 "D" Street Archway Between 74S and 75 SOQ; Ward 83N is to Near Right.
113 Typed Sheet of Newspaper article from Great Lakes Bulletin, 23, June, 1950, NSD, Naval Hospital Presented Secretary of the Navy's Safety Award.
114 Heading for Typed Pages With Information About the U.S. Naval Hospital, Great Lakes, and World War II.
115 Typed Pages With Information About the U.S. Naval Hospital, Great Lakes and WW II.
116 More Typed Pages About the USNH Great Lakes and WW II.
117 More Typed Pages About the USNH Great Lakes and WW II
118 More Typed Pages About the USNH Great Lakes and WW II.

USNH
GREAT LAKES

U.S. NAVAL HOSPITAL, GREAT LAKES
HISTORICAL SCRAPBOOK
1911-1953

Compiled By

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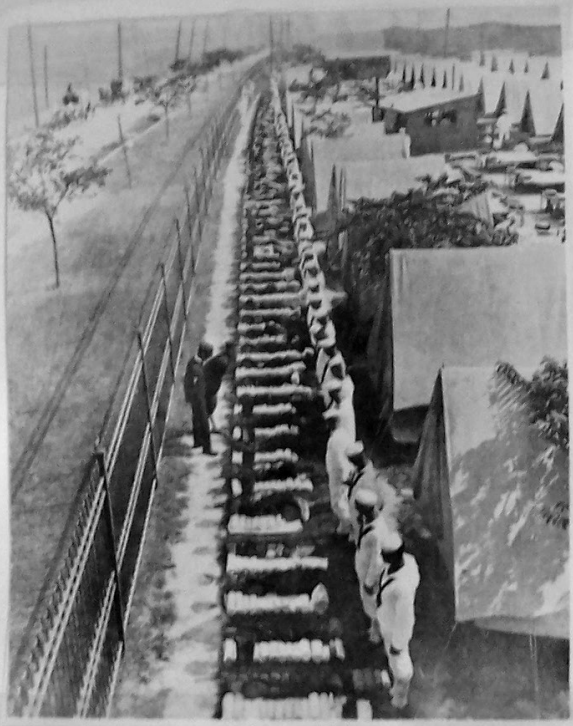
Public Affairs Office 1982



Recruits are inspected during detetion period. Fence is next to Sheridan Road, 1918.

Basic training during this period was only 3 weeks. Upon reporting for duty, the rookied was placed in one of 3 incoming detention camps, which was surrounded by a fence, where he would remain in strict isolation. There was a fear of a new recruit bringing in an infectious disease, so they were seperated as much as possible from the rest of the camp until it was determined there was no disease. During this time, the fundamentals of naval training and regulations were instilled. The recruit would have his hair shorn, given his shots and a thorough medical and dental exam and issued 44 pieces of clothing, a mattress, blankets, and a hammock, all which had to be stensiled with his name. During his time in detention he would learn how to properly wear his uniform, keep clean at all times, salute officers and drill. They were weel fed and it was said a man could gain 10 pounds easily.

With the huge influx of new recruits, tents were used to house the men until winter set in. Then men were crammed into any building possible within the detention camp area, including the chowhall. After 3 weeks they were taken to Camp Ross and given tests to determine whether to be sent to a special school or apprentice training before being sent to the fleet. Schools at Great Lakes included Electrician, Gunnery, Hospital Corps, Machinist, Radio Operator, Signal, Aviation Mechanics or various ratings inthe Public Works Regiment.

WHO SAID I JOINED THE NAVY TO KEEP FROM DIGGING TRENCHES?
HAIN-

The first cases of the second wave of Spanish Flu was reported in the Naval Yards of Boston in the last days of August 1918. Within a week it was reported in ports along the nation's coastlines. One very large naval base, a thousand miles from the Atlantic was the Great Lakes Training Station, forty miles north of Chicago, Illinois. Great Lakes was one of the largest training stations for recruits in the Navy and was at that time at full capacity training new seamen for the Navy's wartime effort. The second wave of Spanish Flu was reported at Great Lakes on 11 September 1918, the first death 14 September. All liberty for sailors at Great Lakes was cancelled on 19 September 1918, but it was much to late. Moving from the northern suburbs, nearest the naval station, to the south, the epidemic was soon reported in Chicago, the nations biggest rail center. The pandemic reached its peak in that city in the last part of October 1918, killing a total 14,000 people.

The Great Lakes Naval Hospital, with a capacity of 1,800 beds was treating wounded from the war, recruits and the naval station staff. Influenza spread through the training station very quickly and soon the hospital was treating more than 2,600 patients. Influenza and pneumonia patients were seperated from other patients as much as possilbe. Beds were set up as close as possible on the wards, in storerooms and even in hallways. Most influenza patients were treated in the regimental dispensaries, the majority treated for symptoms and sent to their barracks (tents) for bedrest. Only the most serious were transfered to the hospital, mostly with symptoms of pneumonia. On 24 September 1918, the largest number of influenza and pneumonia cases were admitted in one day, 384. On 25 September, 1807 patients were under treatment for pneumonia alone. 92 patients died that day. Between September and November 1918 more than 2,500 patients were treated for influenza and pneumonia, more than 890 died.

The hospital did not have a suitable number of trained nurses and corpsmen (Hospital Apprentices and Pharmacist Mates) to deal with the increased patient load. Nurses were procurred through the Red Cross and the Committee on National Defense of the Midwest Grand Lodge, Ancient Free and Accepted Masons. Students from Hospital Corps School, located at Great Lakes worked in the hospital and regimental sickbays. 70 additional yeomen were obtained from the training station to do the clerical work and maintain records. Supplies were strained and difficult to come by.

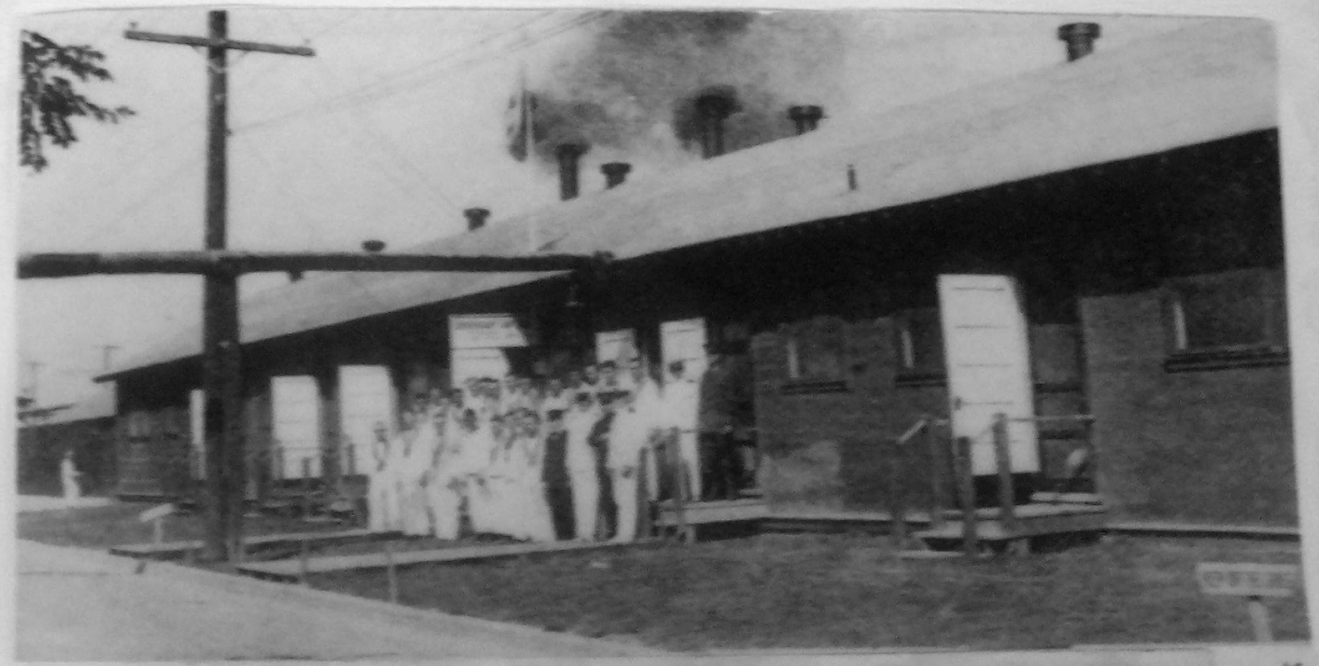
By mid-October the brunt of the crisis had passed in the Great Lakes area. The patient census went down, though there were influenza and pneumonia patients admitted and sometimes die until the following spring. But as the epidemic waned at Great Lakes, it was nearing its peak in Chicago and most of the country. The Spanish Flu epidemic was the greatest disaster faced by the Great Lakes Naval Hospital. Contending with severe overcrowding, shortage of trained personnel, supplies and facing an epidemic nearly impossible to treat, the hospital staff distinguished themselves with extremely long hours, hardwork and a dedicated compassion to relieve the suffering of the victims of the epidemic and other patients admitted during the crisis.

The second wave of Spanish Flu was reported in the United States among naval personnel on the docks of Boston in the last days of August 1918 and soon reported in ports along both coastlines. It spread across the United States very rapidly following the chief lines of commerce such as railways, highways and waterways. Influenza would appear in an area very quickly, affect a large portion of the population and then disappear. It was not a disease that would linger for long periods of time such as tuberculosis or malaria. After its initial outbreak in an area, it would peak after about 2-3 weeks giving rise to a high casulty rate. Some areas were more affected than others, there was no definite pattern, though it was recognized that young adults had a higher rate of pneumonic complications. Health officials were poorly informed of the pandemic and many doctors did not think flu or "grippe" as being very serious until they acknowledged the incredible death rate. Influenza was not a reportable disease for the Public Health Service until at its peak in the last week of October 1918 and then only in large metropolitin areas.

There was mutual fear and panic among the population. Doctors and nurses were hard pressed to help the sick and frequently fell ill themselves. Hospitals were overcrowded, flu cases were placed in isolation, but the magnitude of the outbreak made this impractical. The ill were basically bedridden until strong enough to continue their normal routine, unless complications set in. Absenteeism stressed essential services and businesses closed down. Volunteers organized to help those in need. By the first of December 1918, the Spanish Flu crisis had passed. WWI ended and the soldiers returned home. A third wave struck the world in March 1919, but was milder in effect and duration.

The Spanish Flu pandemic of 1918-1919 was one of the most destructive natural disasters in history and came at a time when mankind considered himself "modern" in light of technological advancements of the past century. He could fly, build automobiles and devise devestating weapons of war, but was made helpless by a mutant virus. Ironically after the epidemic dissapated in 1919 Americans took little notice of it in the aftermath of WWI, the League of Nations and the World Series. The epidemic did cause expansion and improvements in the American Public Health Service and a great deal of research that eventually gave rise to the knowledge we know today of the disease.

A group of Hospital Corps men eating dinner in one of the subsistence units of the Hospital Group.



Medical Officers and corpsmen poise in front of the main dispensary.

Pharmacist Mates prepares compound for a prescription.

With iodine on his arm, a recruit receives a shot from a medical officer, who were the only ones allowed to give innoculations. The syringe and needle would be sterilized and reused.

LT John Phillip Sousa poises with his staff and members of the Great Lakes Naval Band. Sousa, famous as a civilian as a songwriter and band conductor, was known as the 'March King' and for his stirring martial music. Probably his best known work was "Star and Stripes Forever". He became a commissioned officer in the Naval Reserve and was stationed at Great Lakes even though in his late 50's.

The Great Lakes Naval Band had a total of 740 muscians and buglers and was the largest marching band in the world. Each of the 12 regiments at Great Lakes had a band, they were augmented to the station's band under the direction of LT Sousa for parades and ceremonies. The entire band toured large cities in the mid-west.

During this period the United States entered the war in Europe. Captain William Moffett was Commanding Officer of the Naval Station and Commadant of the Ninth, Tenth, and Eleventh Naval Districts. As District Commadant, Captain Moffett had jurisdiction of all naval activities from New York to Nebraska, Kentucky to North Dakota. Among his responsibilities was the patrolling of the 5 great lakes and enforcing navigation laws. As Commanding Officer of the Naval Training Station, Captain Moffett was the catalyst for the station's rapid developement. Under his leadership the logistic problems of procurring, transporting, and housing huge amounts of supplies and troops were delt with very effectively. Train tracks were connected to the various camps to facilitate the movement of troops and supplies, particularly coal which was the main sourse of heat and steam.

The Naval Station expanded as an enlargement of the original station, becoming one very large town. Captain Moffett established the regimental unit concept at Great Lakes. Each regiment was a self contained unit similar to a small town. Each had a chowhall, storehouse for supplies, barracks, canteen for snacks and small personal items, barber shop, tailor shop, post office, band, sports program, and dispensary. With an increase of personnel, regiment could be added to regiment without disturbing what had already been established. Seven seperate camps were located on the 644 acres that made up the station during the war. Several regiments may be located in the same camp. A single school or sometimes a variety of schools were part of one regiment.

There were many special schools to give advance training to sailors after they had completed their basic training which was called "detention". The school trained Coxswains, Quartermasters, Artificers (craftsmen), Gunners' Mates, Radio Operators, Machinist Mates, Signalmen, Hospital Corpsmen, Armorers, Aviation Quartermasters, Aviation Mechanics, Aviation Officers (pilots), and Ensigns for the Naval Reserve Force. For those not selected for the special schools, apprentice training gave the basic skills in seamenship. Great Lakes had a fleet of 7 training ships that patrolled the 5 great lakes and gave men practical experience. These ships were among the oldest in commission at the time. All men were given physical training as well as mental and taught the use of the rifle.

In 1918 an aviation regiment was established at Great Lakes which included schools for aviaors, mechanics, and quartermasters. A hanger and runway were built. The school was the largest of its kind in the navy. There was also a Public Works regiment made of sailors who constructed the neccessary buildings as Great Lakes rapidly expanded. Because of the war, the civilain workforce could not provide the civilian labor needed. Of the 2,200 man force the majority were skilled craftsmen from civilian life. These were the forerunners of todays Seabees. Great Lakes also claimed the world's largest laundry, largest drill hall and marching band.

There was a great deal of patriotic feeling during the war. Sailors, known as "GOBS" (government owned bodies), were treated with respect while off the station. Red Cross had facilities on base, and the YMCA, Salvation Army and other social groups furnished places for the gobs to spend their liberty. A sailor in uniform was a frequent and accepted sight in Chicago and the Naval Station was frequently in the media spotlight in a very positive manner.

Great Lakes sailors line the main road leading to Ross Field awaiting the arrival of Secretary of the Treasury and Director-Genral of Railroads, William G. McAdoo. Parades and ceremonies were very impressive at Great Lakes and attracted many high ranking officials such as Former President William H. Taft, who had attended the dedication ceremony of the station in 1911. Others to visit were the Secretary of the Navy, Chief of Naval Operations, Governor of Illinois, Mayor of Chicago, many foreign dignitaries and important buisnessmen. On certain days civilians were permitted on base to view the spectacle and visit loved ones and friends.

Great Lakes Wounded Tell of—

EPIC U. S. NAVAL BATTLES

Pictures on Page 13.

BY JOHN F. DELANEY.

Eyewitness stories of American battlefronts were related today at Great Lakes Naval Hospital.

There 28 marines and sailors are recovering from wounds inflicted by German and Jap bombs and bullets. All said they wanted to get back in the fight, but some will never fight again. Others will be back with their original units in 10 days.

It was a panorama of war brought to Chicago—this visit to heroes of Casablanca, Guadalcanal, Santa Cruz Islands, Coral Sea and Midway.

It was like a homecoming, as Ensign Valera C. Vaubel, N. C. U. S. N., nurse heroine of Pearl Harbor greeted Marine Corp. Fred Wilters of Milwaukee. He had been a patient in the hospital at Pearl Harbor, where she helped save many lives.

The 28 boys' stories follow individually, that battle actions may not be confused.

Gunner Gets Direct Hit on Jap Bomber

Yeoman Paul Henry Zblewski, 3258 N. California av., former St. Michael High School athlete, related the story of the attack on the Hornet, which was sunk in the Santa Cruz battle. He said:

"The battle of Santa Cruz was Oct. 26. I was in the 'ready room' aboard the carrier Hornet. A signal blew—'man battle stations.' I donned my gas mask and flash clothing and as we looked to starboard, we saw specks of silver in the sky—Jap bombers.

Soon Japanese torpedo planes attacked our ship. We could see the pilots. Then one of our gunners let go—he made a direct hit on the first Jap bomber. It went down in flames. A second and a third received the same treatment.

"The fourth dropped a bomb on our flight deck. About the same time a torpedo hit us. It slowed us down and made us an easy target. Another bomb landed thirty feet from me—it threw me against the bulkhead. I was stunned for seconds and my arm was injured.

"Some of my mates braved the Jap fire to give me first aid—they poured sulfanilamide on my arm. I think this helped to save it.

His Leg Shot Off, Marine Downs Plane

"Five minutes later a Jap bomber crashed against our superstructure. The starboard deck flamed. Our boys formed a bucket brigade and put the fire out. Another torpedo plane rammed our bow. They had hoses there and put that fire out, too.

"Enemy planes swarmed all about us. Three planes crashed the Hornet, altogether. Another order came—'be ready for another attack.' It seemed as if everything the Japs had was hurled at us.

"But the way the marines conducted themselves was inspiring. As one was killed at his gun, another would step up, unstrap him and go to work as if nothing was happening. One marine had his leg shot off—loosened his belt, strapped his leg to stem the blood. I saw him get at least one Jap plane.

"I saw action at Midway, Coral Sea and Guadalcanal, but this was my most severe action."

Gilbert Clinger, painter, second class, Connorsville, Ind., 29, and married, told the story of Casablanca:

"I was attached to the amphibious force. We went in fighting—the men had pistols, tommy guns and of course the tanks, and batteries which were landed.

"The action started at 1:30 a. m. Our planes cleared the sky at dawn. I saw the Rutledge, the Scott, the Bliss, the Murphy and Hughes torpedoed and sunk—I helped pick up 66 of the crew of the Bliss just 300 yards from our boat. It floated long enough to permit all personnel to get off.

"Everything attending the landing was done in the dark—and with clocklike precision.

"Two destroyers were sent in and they were fired upon. Then our troops went in under barrage and a continuous shelling followed for thirty-six hours."

Clinger added:

"I'm going back to duty with my unit next week. Oh boy, am I happy—it gets on your nerves, eating, sleeping and doing nothing."

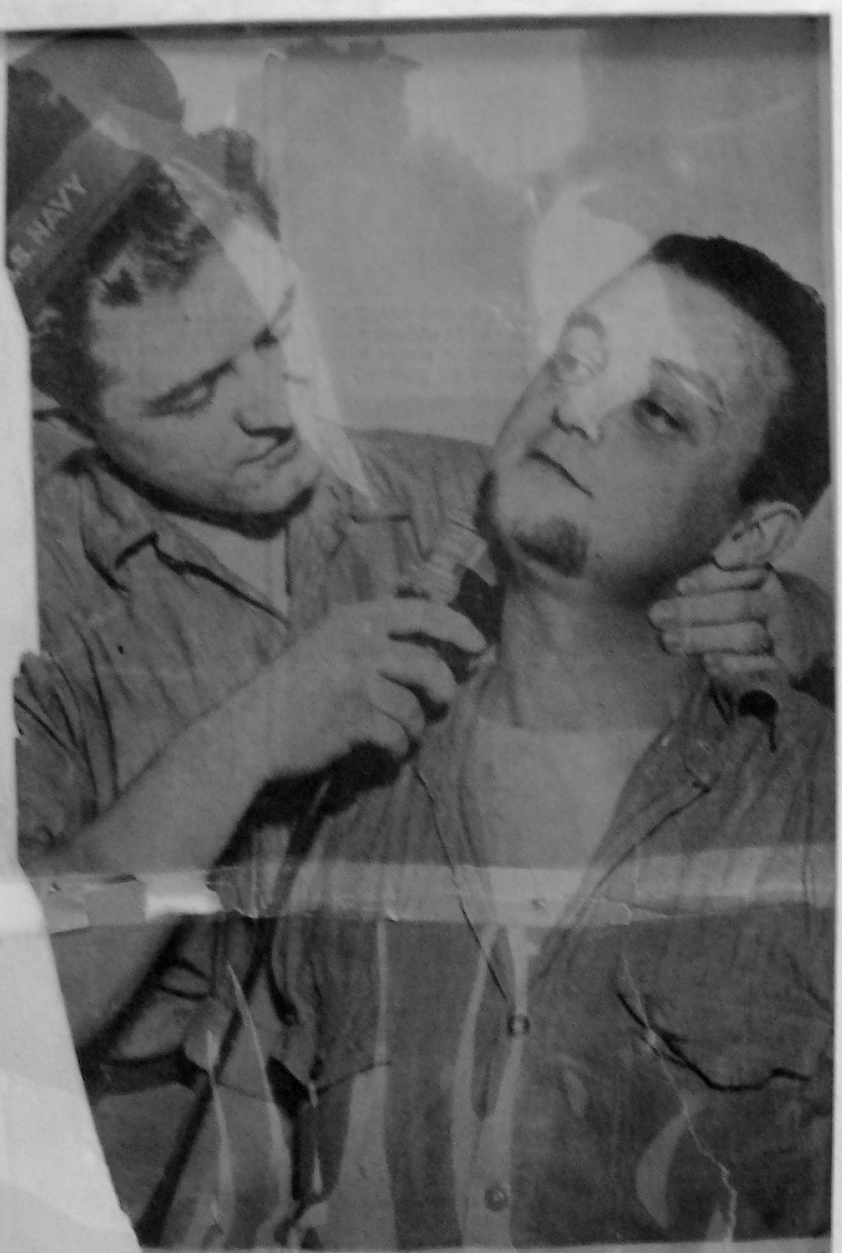
Injured in Battle With Three Zeros

Francis Joseph Chantigny, farmer of Silverwood Mich., aviation radio man and tail gunner. He served on the Yorktown before it was sunk and was assigned on the Hornet when it went down. He said:

"I was injured when the Hornet was sunk. I was a rearseat gunner, and we had taken off to attack the Jap fleet. We made the attack and started back. Then three Zeros jumped us and we had a little dogfight. We got two out of three. That's when my pilot and I got hurt, but we brought the plane back. When we arrived the Hornet had been disabled. We couldn't get aboard, so we had to hit the water."

2/12/43

Patients awaiting morning sickcall by their beds. Majority of the wards were constantly filled with patients. They were connected by a covered walkway that protected both staff and patients from the elements. Often due to staffing shortages, one nurse would be responsible for several wards and the corpsman was reposnsible for the patients. Food was transported from the main mess hall by steam heated food transporters. All ambulatory patients and corpsmen were responsible for ward cleanliness and field day was held daily.



Reunion: Yeoman Paul Zblewski of 3258 N. California ave., gives his buddy, Gilbert Clinger of Connersville, Ind., a harder CLI[P] at Casablanca. Paul, a former star athlete at St. Michael High, wa[s] on the Hornet. Both are anxious to get back in the fray.

Coral Sea: Fred Leavell of Aurora is smiling again after suffering shrapnel wounds in the Coral Sea. His ship was near the Yorktown when firing started.

Milwaukeean: Edward J. Schwartz (right) of Milwaukee, who was wounded in the Yorktown's last battle, and Harold Wallace of Wellington, O., who lost a leg in convoy service in European waters, enjoy a friendly game as they recover

Sky Fighters Chicago and Illinois' camouflaged para- troopers are in the thick of marine ma- neuvers at San Diego, getting ready for the time when they'll descend on the axis. From left, are Pvt. M. L. Mears of Chicago; Pvt. P. L. Maske[illegible] Zerling, Ill.; Sergt. Jack Erz of S[illegible] of Belleville, Ill. They establishe[illegible] headq[illegible] from [illegible] s than a minute after l[illegible]

Casablanca: Ken Halsted of Arlington, Ia., badly burned in the invasion of Africa, runs a temperature (and who wouldn't) as Ensign Dorothy Reide gives him a regular checkup. He was in the fight with the Gene Bart. His main hope is to get back into the battle quickly.

THIRTY-FIVE THOUSAND GREAT LAKES SAILORS—PART OF THE YOUTH OF THE GREAT MIDDLE WEST—EN MASSE

A GALAXY OF FORMER "BIG-LEAGUERS"—Now the Great Lakes Naval Training Station Ball Club. The players are from left to right: top row—Johnson (formerly Philadelphia Athletics), Faber (White Sox), Chouinard (White Sox), Dr. John B. Kaufman, Athletic Officer; Ehrhardt (Columbus), Jones (New York Giants), Croake and Dyer (Detroit). Middle row—Halas (Illinois University), Fairclothe (American Association), Thomas (Boston), Leonard (Washington), Driscoll (Chicago Cubs), Fox (Denver), Neusel (St. Louis). Bottom row—Swanson (Columbus), Clemons (St. Louis Americans), Rycraft (Peoria), Hoffman (St. Paul).

REGIMENTAL DISPENSARIES

There were two seperate divisions of the Medical Department at the Great Lakes Naval Training Station; the Hospital Group, which treated the seriously ill and surgical cases, and the Regimental Dispensaries Group which preserved the health of the men and cared for minor illnesses or injuries. The dispensaries were under the jurisdiction of the Commandant of the Training Station and not the Hospital. There were 64 medical officers and 240 hospital corpsmen assigned to this group. Each dispensary had 3 medical officers, 1 Chief Pharmacist Mate, a 1st, 2nd, and 3rd Class Pharmacist Mate and several Hospital Apprentices. There was 1 main main dispensary which had a complete laboratory and 12 subsidiary dispensaries, one for each regiment. Each had a dental office. 2 medical officers were detailed to care for sick military personnel and their families off the station within the Chicago area. The dispensaries were also responsible for the practice of preventive medicine measures and the innoculation of all recruits in the begining stage of their training.

When a man became ill or injured he was examined by the medical officer or Pharmacist Mate at the dispensary of the regimental unit to which he was attached. If possible, he would be treated there and sent back to his unit. If serious, he would be taken directly to the hospital. If the symptoms suggested something contagious, the patient would be placed in an isolation ward at the dispensary, strictly isolated from the remainder from the regiment, until the doctor could determine the cause and treatment prescribed. This policy of treating the patients in the regimental dispensary and transferring to the Hospital Group only the severe cases avoided overcrowding of the hospital and early treatment was made more certain. This was particularly true during the Spanish Flu Epidemic of 1918 when barracks adjoining the dispensaries were used to house the sick. These regimental dispensaries remained seperate units from the hospital until regionalization made them part of the Naval Regional Medical Center, Great Lakes on 1 July 1971.

One of the main forms of recreation at Great Lakes was the watching and participation of organized sports. The Navy encouraged the sports program to combat idleness. Athletic competition gave a man the opportunity to gain personal condifidence, increase strength, sharpen skills and agility, and participate in a team effort. One of the favorites was pushball, a game where an entire company would appose another in pushing a huge inflated ball towards the opponents goal. Equipment was made available and the men were able to play various sports among themselves. There was baseball, football, cageball, track and field, basketball and swimming. Soon their was inter-regimental competition and teams formed to represent the station. In 1918 more than 900 men applied for the station's baseball team.

Boxing and wrestling were very popular, matches were held every wednesday evening to a packed house. instructors were made available to various regiments and developed men who represented their regiments in inter-regimental competition. No professionals were allowed to contend. Fighters represented the station at matches throughout the country and even in international competition in London where they won the batamweight title. Famous fighters as Jack Dempsey, Jim Corbett and Jess Willard as well as sport writers and boxing promoters made special trips to Great Lakes to witness the bouts.

During WWI the station expanded from a few thousand to tens of thousands and with this increase came some of the best athletes in the country. Great Lakes could claim among their ranks the worlds Amateur Ice Skating Champion, Art Staff, one of the greatest ski jumpers, Einar Jensen, and men who would earn world records in swimming and track while stationed here. One sailor, George Halas, from the University of Illinois was on the station's baseball, basketball and football team. He latter became owner and manager of the Chicago Bears professional football team.

Teams representing the station played throughout Chicago and the mid-west, playing college and ameteur athletic clubs and occassionally professional teams. The station's basebell team played both the Chicago Cubs and White Sox, unfortunately losing to both. the Central A.A.U. Indoor Track and Field Championship of 1918 was held at Great Lakes. The largest indoor track in the world was built for the competition. But the brightest star in the Great Lakes atletic program was the station's football team of 1918. Undefeated, the Bluejackets of Great Lakes defeated Anapolis, the champion of the east coast and both college and military teams throughout the mid-west. They were selected to represent the mid-west in the Rose Bowl on New Years day 1919. They soundly crushed the Mare Island Marines who had defeated college and military teams on the west coast. Upon their return to Great Lakes they were acknowledged the undisputed football champions of the United States.

Jim Dykes and some of his White Sox ball players visited patients in wards before game with Great Lakes team, 7 August 1944.

Fun for 1,400 Sufferers at Great Lakes

(Full page of pictures in Pictorial Review.)

A man CAN recapture yesterday—even though in between the present and the past are deeply burned memories of battles to the death in the far-flung corners of the earth.

Fourteen hundred naval veterans discovered that last night at the Purple Heart Halloween party of The Chicago Herald-American at Great Lakes Naval Training Center.

Many of them discovered it as they attended the funmaking in wheelchairs, hospital cots and on crutches.

More like children than men who had felt the bite of flying steel, be-ribboned sailors and marines cavorted as they did when they were kids.

With navy nurses, Red Cross workers and members of the Women's Defense Corps of America as fellow participants the navy men ducked for apples, pinned the donkey's tail, threw darts, fitted diapers blindfolded on dolls, broke balloons, and engaged in other games that are part of a typical American party.

DIAPER changing race produced one of the best laughs of the night and crowd roared when Pfc. Chester E. Miller became entangled in unusual task.

BASHFUL SAILOR—he wouldn't reveal his name—and Dorothea Forsythe try a different balloon contest. It's a squeeze play to break balloon in specified time.

Mrs. W.J. Stellman and Mrs. Paul K. Burke, two of the Hospital's well known Gray Ladies, assist Pfc. Marvin Holschbach, USMC, in making an Easter greeting record to send to his family.

Gray Ladies Came to Great Lakes In 1943, Work Has Been Valuable

Gray Ladies, or American Red Cross volunteer workers, made their first appearance at the Naval Hospital in the spring of 1943 at the request of the Medical Officer in Command.

Since the time, six years ago, when the Gray Ladies became a part of the Hospital scene, their work has become an invaluable adjunct in the treatment of many patients. They cover a broad field, including keeping patients supplied with the several comfort items such as magazines, stationery, games and cards. They also stand ready to assist patients by shopping for them and to help them wrap and mail presents. This latter work becomes a matter of major proportions during the Christmas season.

Many a young Navy recruit, ill and perhaps away from home for the first time, is pleasantly surprised by a visit and the presentation of a gift on his birthday by one of the Gray Ladies.

Teach Handicraft

Many of the handicrafts are taught bed patients so they may utilize their time making leather purses for their mothers or best girls during the time they must be confined in bed. These handicrafts are taught by Gray Ladies who have had special instructions in these arts and crafts.

Gray Lady duties are not to be confused with those of the professional nurse or recreation and social worker, although they are closely allied in purpose. These duties are a component part of the total program dedicated to the comfort and recovery of the sick, injured and handicapped. Before a Gray Lady assumes duties in a hospital she is given special training designed to prepare her for this type of work.

One of the most beneficial and valuable undertakings of the Gray Ladies is their arrangement to give free piano lessons and to arrange opportunities for participation in group singing.

Great Morale Boosters

The Gray Lady Service at this Hospital is particularly valuable because many of the patients are recruits and, for most of them, is the first time they have been away from home for any length of time. Consequently, the individualized help of these volunteer workers proves to be one of the greatest morale boosters for the men.

The Gray Lady Service evolved from the activities of a group of volunteers, banded together in the last year of World War I and who provided a variety of friendly and helpful service to the sick and convalescent at Walter Reed Hospital, in Washington, D. C. In their early days the volunteers were concerned primarily with hostess and recreation duties. In June, 1918, the return of the sick and injured from Europe, together with the influenza epidemic, gave impetus to the need for more direct services to the patients on wards and convalescent units. It was also about this time the gray dress and veil were adopted as the official uniform of these volunteers and the name "Gray Ladies" was affectionately bestowed by the patients because of this attire.

The Gray Ladies, who serve at [illegible] Hospital, are recruited by the Chicago and North Lake County American Red Cross chapters and work with the American Red Cross staff assigned here.

We can all well give a vote of thanks to these volunteer workers who so unselfishly donate their time to aid in every way possible the recovery of men and women who are patients here.

The Hospital float participated in the Navy Day Parade in Chicago on 27 October, 1944, and won first prize in the parade.

Occupational Therapy on the wards.

SPECIAL GUESTS at war bond premiere, "The Story of Dr. Wassell," 25 wounded navy and marine veterans from Great Lakes Naval Hospital found added treat. Greeted by new starlet, Carol Thurston (left, center, in black gown), they were escorted by 25 attractive war workers, elected "queens" of their plants. The show sold $2,500,000 worth of war bonds. (Herald-American Int'l. photo.)

PICTORIAL REVIEW
Herald-American
SECOND SECTION
Tues., Dec. 19, 1944—11

Head Brace could not stop Sailor Howard G. Bowes from smiling when he was given $5 by Mrs. Evelyn Wilson at Great Lakes. Money came from Herald-American's Wounded Veterans' Fund, raised through contributions from sporting events, promotions, totaling $17,500.

Kenneth Kelly, Kirkwood, Illinois
Recieves Purple Heart Award
Injured in South Pacific Circa 1944

Purple Heart Cruise Brings Day of Fun for Bluejackets

One hundred men from Great Lakes were guests of the Chicago Sun-Times on Tuesday as the S. S. North American sailed out onto Lake Michigan for the fifth annual Purple Heart Cruise.

Included in the groups from the Center were men from all commands. They spent the entire day relaxing and being entertained. Theatrical personalities from Chicago lightened the day after the men had consumed a huge turkey dinner.

The entertainers who participated were Day, Dawn and Dusk, Gloria Vann, Chet Roble, Barry Sherwood, "Uncle Harry" Solomon, Lorraine Fortune, Paul Gilbert, Bela Babai, Luis Horvath, Richard Gordon, Jack Ross, Eloise Kirk and Bobby Peters. Star entertainer of the day was Marie Lawler, singer, who won the Sun-Times Harvest Moon Festival contest.

There to greet the Bluejackets and Marines, who were joined by groups from Fort Sheridan, NAS Glenview, Hines and Downey Veterans Hospitals, were 60 airline hostesses who also did their bit to lighten the day. They bombarded the boys with brightly colored sailor hats, cigarettes, candy and cigars.

The cruise is an annual affair sponsored by the Chicago paper. It is supported by contributions from the readers of Kup's Column, a daily feature of the paper, written by Irv Kupcinet. Kupcinet conceived the idea of the cruise several years ago.

Hospital Prescribes

Rehabilitation Program Is Just What Doctor Ordered

Instead of Lying Abed Counting Hours Go By, Patients May Volunteer for Education Classes, Games, Skills, Crafts, Even Maintenance Work

It isn't the medicine or the pills you have to take, say most people when telling what's wrong with hospitals, it's those long dull hours you pass in bed when you're getting well.

Navy doctors at Great Lakes had this thought clearly in mind over a year ago when they began working on a plan to make ailing Bluejackets' odd moments busy ones. Today the Rehabilitation Program in the Navy is just beginning to hit full stride—at Great Lakes and other bases as well. In the coming months, rehabilitation is expected to develop into one of the major phases of hospital work.

Bluejackets who enter the Training Center Hospital soon discover there is a Rehabilitation Program, but learn just as soon that they don't have to take part in it unless they want to. On his arrival every new patient receives a letter explaining what the program is and inviting him to take advantage of it.

In a friendly manner, the letter wishes him a pleasant stay and rapid recovery, but expresses the hope that he will be active in the program: the studies, the craftmanship, the games, even work with the Hospital's maintenance crews.

Fills Out Questionnaire

If the patient is interested, he fills out an extensive questionnaire which when turned in to the Rehabilitation Board gives members a pretty good idea of that sailor's educational, civilian and Naval background, as well as his interests.

From long lists on the questionnaire, he checks the activities of his choice. His ward medical officer indicates whether the patient is fit for light, medium or strenuous activity, fills in his recommendations and forwards the blank to the Rehabilitation Board.

Senior member of the Board is Lt. Cmdr. R. E. Kinneman. His associates are Lt. J. P. Draney, Lt. A. J. Kirkpatrick, Lt. (jg) F. H. O. Shelter, Lt. (jg) Eleanor Schreyer and Miss Margaret Doyle. Miss Doyle represents the Red Cross. Captain J. W. Ellis is ex officio chairman. The Board meets twice weekly to iron out matters of policy and to present new ideas for consideration.

The completed questionnaires are sorted into groups at Board Headquarters and forwarded to the Rehabilitation activity in which the patient has indicated an interest. There are 10 groups from which he may make a choice.

Bed patients are necessarily limited to activities requiring no heavy work, but they don't go wanting for something to do. Study-minded bed patients step for one of the 18 self-teaching textbook courses issued by the Hospital Educational Services, while others may keep their fingers and minds busy with bedside activities offered by the Red Cross Over Lacing, Leatherwork, weaving, painting, drawing, needle craft and games under the twelve supervision are available.

A broad field awaits the ambitious or up-patient at the Hospital. An Arts and Skills Shop offers woodwork, leathercraft, weaving, pottery, clay modeling and painting, and experienced instructors are there to show him how. These skills are especially helpful in aiding the Bluejackets develop hand and arm muscles weakened by inactivity or injury.

The sailor-patient with an eye toward brushing up on his studies may use any of the self-teaching texts offered bed-patients and has a chance to attend one of the classes sponsored by Educational Services. Classes in code, shorthand, slide rule, mathematics, blueprint reading and drafting meet regularly. Last month 383 patients took part in the Hospital Educational Service.

There's golfing, bowling, gymnastics, hiking and other sports available through the Recreation and Welfare Department. The library offers recreational and directed reading, and to those qualified, a chance to be a library assistant. If he's a bathtub tenor, he can sing with the Chaplain's Choir; if a hit on the solid side, Jack he'll get a tryout with the Hospital orchestra.

Volunteers All

Public Relations can use sign painters and motion picture operators. Typists and clerks can be put to a number of uses. Public Works needs carpenters, plumbers, mechanics, even florists, to do maintenance work in the Hospital buildings. It's all on a volunteer basis; a patient who is a qualified electrician isn't assigned to the Public Works Division unless he specifically says he'd like to work. The Rehabilitation Program is not a supply depot for work details; its main function is to place patients where they'll be useful but even more so doing a job they enjoy.

Combat Fatigue patients those Bluejackets and marines who have returned from the wars aren't left out of the Program. They take to the specially-planned hikes and outings like a fish to warms. They go fishing, play baseball and other outdoor sports. It all makes their time spent in the Hospital shorter and more pleasant.

Movies, both in the Recreation Hall for up-patients and shown in the wards for those who can't get around, make time spent in recovery something more than a halt in one's life.

AT LAKES BULLETIN Friday, May 12, 1944

Fun as Well as Medicine

WHO SAID WE'RE SICK?—The patients at the Training Center Hospital soon discover that the Navy's rehabilitation program offers studies, work and play of an almost endless variety to any Bluejacket who wants them. Upper left, Delmar Wiley, ARM1c, survivor of the Lex, (left) and Charles Liberto, EM2c, a veteran of Tarawa, find time goes faster when they're repairing radios. Upper right, Everet Pohlke, S2c, writers with pottery; the necessary rolling and finger manipulation will make his burned hands heal all the quicker. Lower left, Kenneth L. Shank, MM2c, a Helena survivor, paints signs while he recuperates. Lower left, 16 mm. sound movies are shown in the wards to patients who can't get around.

Hospital's Outdoor MAA's Force Does Grand Job on Tough Detail

Without a doubt there is not a Bluejacket or "Leatherneck" in this or any other Navy who doesn't take a dim view of physical labor in any manner, shape, or form. That is, with the possible exception of the MAAs in charge of various cleaning details or stations. These boys are really "hot to go," in the old work department.

Naturally, on any Naval installation, whether ship or shore, nothing can be overlooked when it comes to cleanliness, neatness and general good repair. This fact is doubly important at a Naval Hospital where the job of keeping the grounds shipshape falls on the shoulders of the Outside Master-at-arms office.

Located in bldg. 37, the OMMA office is a beehive of activity during working hours, and sometimes all night in extreme emergencies such as the recent blizzard. The sudden 17-inch snow caught all hands with their shovels down. Undaunted, the OMAAs swung right into action, clearing sidewalks, driveways, snowed-in ladders and digging out stalled cars.

All in Days Work

Although the boys did a commendable job, Chief M. S. Prunty, MAA-in-charge, claims it "was all in a day's work."

The affable Chief, 18 years in the Navy, has been stationed at the Hospital since October 1950. He served with the Amphibious Forces in the Pacific throughout World War II, and had one transport, the George S. Elliot, sunk under him during the Marine landings at Guadalcanal in 1942.

Subsequently, he served aboard the Naval Transports Hunter, Liggett, Barnette and McCauley (later sunk) and participated in the landings at the Marshall Islands, Iwo Jima and Okinawa.

In his present capacity as chief of the outside MAA office, he keeps a weather eye to see that everything runs smoothly, with a minimum of confusion.

Varied duties of the OMAA office range from keeping the lawns and hedges in constant trim to cleaning the ramps and sidewalks. They are also responsible for the liberty of all class one and class two patients, first pay grade excepted.

While the OMAA office is responsible for the supervision and completion of all outside details, the work is performed by such patients as ward doctors may direct.

Corpsmen Students Help

The daily details are supplemented each week by a 60-man crew from the Hospital Corps school. Patients detailed to the outside MAA office are required to put in a five-hour day on the job for which in turn, they are granted liberty every other night.

The office is completely stocked with such handy little gadgets as snowshovels, rakes, scythes, hoes, chipping tools lawnmowers, sickles, spades, wrenches and so forth. Also, perish the thought, the boys are loaded with brooms and swabs, which apparently, they are willing to pass out at the slightest provocation.

Eight men complete the OMAA staff including Roy E. Mattox, HM2, of Shelburn, Ind., Jim C. Steves, HM2, and Randall M. Hamby, HM1, of Terre Haute, Ind. These three men are the number one assistants to the chief and carry the ball most of the time, with an assist from Loren Tyson, HM1, who represents the office as MAA at bldg. 1-H.

Visit of Surgeon General, 4 September 1950

Rear Admiral C. A. Swanson, MC, USN
Captain T. F. Cooper, MC, USN

Second row: (Left to right)
Commander H. T. Stradford, MC, USN
Captain E. S. Lowe, MC, USN
Captain C. C. Shaw, MC, USN

FREED MARINE TELLS LIFE AS REDS' PRISONER

BY JOHN H. THOMPSON

(Picture on back page)

A young, red haired, freckle faced marine, the first Chicago area service man to come home from a communist prison camp in Korea, stepped from an ambulance at Great Lakes Naval hospital yesterday noon and was swept into a huge embrace by his mother.

Corp. Theodore Juern, 22, wounded in the foot, face, and both legs, could only grin, moist eyed, while he hugged his mother, Mrs. Louise Juern of 108 Belvidere av., Forest Park. Next in line for embraces were his father, Albert; an army brother, Pfc. Richard Juern, 19; another brother, Thomas, 9, and his baby sister, Lillian, 19 months.

Toddler Almost Steals Show

Lillian, whose hair is carrot red like Theodore's, toddled around in a Kelly green coat and almost stole the show from him.

"Boy, it's wonderful," said Theodore, wearing a new marine uniform, decorated with Purple Heart, United Nations, Korean service, and Korean citation ribbons. "There's nothing like it."

In the name of Forest Park's business community, Mayor Vernon Reich, Police Chief Joseph Cortino, and Claude Walker, local publisher, handed Theodore a bouquet of red roses, which he gave to his mother as a Mother's day gift.

Waited Long for Moment

Waited Long for Moment

"You've been waiting a long time for this," said Ted, as his family calls the young man, "and so have I."

Col. R. R. Van Stockum, commander of the marine barracks at Great Lakes, and Lt. Comdr. Arve Lee, administrative assistant to the hospital commandant, told Ted he'd have to stay at the hospital for a few more days.

Next Friday Forest Park plans a bangup parade and civic celebration to welcome young Juern back to the community where he attended Proviso Township High school. The affair, while nominally for Ted, is a tribute to all of Forest Park's service men, Chief Contino said.

Tells of Life as Prisoner

Sitting on a hospital bed, banked with flowers, surrounded by television lights and movie cameras, Juern told of his wounds, his capture, his medical treatment, and life in a POW camp with 200 other Americans.

He said American prisoners organized a square dance every Saturday night to pass the time, dancing with each other while one POW called the steps and others played a violin, a drum, and a guitar supplied by Chinese Reds.

Juern, a machine gunner, in

company C, 1st battalion, 7th marines, was with eight others on outpost on Ronson hill, not far from the truce talk site of Panmunjom, when he was wounded in a Chinese attack last Oct. 26. A grenade was pitched into his trench. Juern said he stepped on it to minimize his wounds.

Treatment Favorable Surprise

He and four other wounded marines were carried away by the Chinese, back to their bunkers, and later to tunnels in the hills. He spent three months in various field hospitals in Korean huts before winding up in a far north prison camp.

"I was surprised at the treatment I got," said Juern. "It was better than I expected. We seemed to get the same food and treatment given the wounded Chinese."

Juern said he saw several other Chicago POWs in the camp. He said he could not reveal their names to the press.

Juern was wearing brand new corporal's chevrons, a promotion since being freed by the Reds. His old boss, Albert Reda, owner of a laundry where the elder Juern is maintenance man, said Theodore could have a job any time the marine was well enough to work.

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21 Corpsmen Honored for Korean Duty

Twenty-one corpsmen at the Hospital have received citations, medals and awards for work above and beyond the call of duty in the Korean theater of operations at ceremonies this month.

In all the men received one Letter of Commendation, two Bronze Star Medals, one Purple Heart Medal, one Navy Unit Commendation and 16 Presidential Unit Citation insignias.

Latest of the medals to be awarded was a Bronze Star presented to Edward Lieffring, HN, at personnel inspection last Saturday. Capt. T. F. Cooper, hospital commanding officer, made the presentation.

Lieffring

Lieffring's citation read in part: "For heroic achievement . . . with a Marine infantry company in Korea on 29 May 1951. . . . Unhesitatingly and with complete disregard for his personal safety he moved forward through the heavy enemy fire to render aid to fallen men."

At the previous Saturday's inspection on 9 Feb., three hospital corpsmen were given awards. George J. Wykel, HM3, received the Purple Heart, Jack R. Bradford, HM2, a Letter of Commendation, and Robert K. Wadgren, HM1, the Bronze Star. Their honors were won on 24 April, 9-12 June, and 22-23 March 1951, respectively.

The lone Navy Unit Commendation and the 16 Presidential Unit Citation insignias were awarded by Capt. Cooper in informal ceremonies on 5, 7 and 8 Feb.

William G. Trost, HM3, was presented the Navy commendation for service with Task Element 90.82 during 13-15 Sept. 1950.

All Presidential citations were awarded for the men's services with the First Marine Division, reinforced, during the period from 15 Sept to 11 Oct. 1950.

Those cited included George J. Wykel, HM3, Carlyle E. Simons, HM3, Richard D. Sampson, HM3, Jerry R. Kostka, HM2, Paul S. Huge, HM, George R. Henry, HM3, Edwin P. Graves, Jr., HN, Robert L. Fredericks, HM3, Oliver L. Frakes, HM2, John Dennett, HN, Frank M. Dawson, HM3, William A. Bruneau, HN, Arlyn J. Barden, HM3, Carlton E. Little, HM3, John F. Collas, HM3, and Lowell F. Krieg, HM3.

NAVY

GOOD FOOD IS A WONDERFUL CHANGE for these three Korean War prisoners after the rations given to them in enemy prison camps. Army Pfc. Harold D. Burnett, Jr., Army First Lt. Robert Kral and Marine Pvt. Harry P. Wessels (left to right) enjoy their noon meal at the Naval Hospital. Pfc. Burnett was a prisoner for 29 months. He was captured while serving in the Fifth Regimental Combat Team. Lt. Kral was captured after being wounded in the leg by shrapnel while serving with a heavy mortar battalion. Pvt. Wessels was captured shortly before the armistice, when he was wounded in the arm by shrapnel. He served with the First Marine Division. Some 30 released POWs have been sent to the Hospital here.

9/18/52

LT. CDR. FRANK M. GRAF, CHC, Catholic Chaplain, administers Holy Communion to Pvt. Peter Ranieri, USA, assisted by (left to right) corpsmen Ken Zielke and John Van Buren, HN's, USN. J. R. Faucher, SR. watches.

Lt. Fix and Staff Receive Recruits' Donations: Use New Developments

The blood bank is an organization maintained within the hospital for the needs of patients, both service personnel and their dependents. Until recent years such an organization could not exist because of the lack of technical knowledge. However, great strides have been made in the scientific advancement of knowledge of human blood in the past decade.

Prior to tne turn of the century transfusions were administered to patients only on extremely rare occasions because of the great number of deaths from the use of them. These deaths are easily understood today when it is realized that no knowledge of typing and crossmatching existed and that even animal blood was used for transfusion. Today, so much information is known about the use of human blood and its various types and characteristics that it necessitates a medical officer who is a specialist in this field to properly determine blood needs, and technicians with special training to carefuly perform the exacting function of typing and crossmatching.

New Advances

The story of the outstanding job performed by the Navy blood banks under the supervision of Captain Newhouser during the war needs no repetition. It was an organization the Navy may well be proud of. Since the end of hostilities the needs of blood for the care of patients have not diminished, but have increased. Each month sees new advances in scientific knowledge which increases the efficiency of blood administration and the uses of human blood.

At the Great Lakes Naval Hospital the blood bank is at present run under the supervision of Lt. L. W. Fix, MC, USN, with a staff of trained technicians. Maxine Vader, HM1, has been performing the function of supervising the technical operation of the blood bank for the past three years. Her skill in this function has contributed to the fact that the blood bank at the hospital has such a low reaction percentage that it is comparable to any institution in the world.

Recruits Furnish Blood

The blood for maintaining this function is obtained from recruits by their voluntary contributions. This is a service for which the public and the patients may well express their thanks. It assures a ready supply of available donors as well as saving Uncle Sam about $30,000 per year, at the present usage rate.

The blood is drawn under sterile technique, typed for many factors, stored in a constant temperature refrigerator and is available for all patients. Prior to use, about one hour of highly technical cross-matching must be done on each unit of blood. Since emergencies sometimes do not allow the consumption of one hour for this procedure, a special type "O" Rh negative blood is kept on hand at all times for emergencies. This blood is obtained from recruits in the same manner but when typing determinations are made it is sorted out and kept aside for this purpose. An adequate supply of this blood is available because approximately 8 to 10 percent of individuals fall into this special type.

Transfusions Are Tonic

Today transfusions are not longer used only for critically ill patients but are used almost like a tonic for improvement of health, building up the body prior to operation, improvement after or during a prolonged illness and many other uses. This could not exist if it were not for the outstanding advancements made just prior to and during the past war.

Maxine Vader, HM1, prepares to take blood from a recruit volunteer.

FOR BETTER HEALTH—Lt. (jg) Myrtle Butt, NC, USN, supervises work of a patient undergoing treatment in the Occupational Therapy Department at the Naval Hospital.

Red Cross 'Covers' Hospital On 24-Hour Service Basis

"Twenty-four hour coverage" is the slogan of the Red Cross in providing services to the hospitalized and duty personnel at U. S. Naval Hospital.

Beginning at 0800 the Red Cross staff begins the day's work in bldg. 82, interviewing ambulatory patients who seek assistance in obtaining verification of need for emergency leaves, in obtaining reports relative to the health and welfare of their families, and extending financial assistance to patients and servicemen granted emergency leaves, assisting patients being separated from service by filing for VA benefits, and in discussing other personnel problems.

Hospitalized dependants also receive the same services and their problems frequently involve contacts with other service installations and ARC chapters to arrange for the care of the children of hospitalized mothers, or to make arrangements to assist in her care after she returns to her home community. During 1951, 3,872 patients sought ARC assistance which involved 11,252 communications by letter, telegraph or telephone.

Call for Supplies

Between 0800 and 1000 corpsmen call for supplies of comfort articles, tooth brushes, tooth paste, soap, shaving cream, razors, razor blades, etc. to be dispensed by the nurses to patients who are temporarily without funds.

From 1000 until 1600 the Red Cross staff and the Gray Ladies (Volunteers) visit the wards. The Red Cross staff (wearing blue uniforms) visit the patients who are unable to come to the office but are in need of ARC services. Gray Ladies, whose primary function is to perform personal services for bed patients, visit the wards three times a week, distribute magazines, comfort supplies, and recreation articles.

Personal services also include shopping, sending money orders, mailing packages, and numerous other things that bed patients are unable to do for themselves.

Their services not only signify the interest of surrounding communities in the servicemen, but also help the busy nurse and corpsman. Last year, over 125 Gray Ladies worked in the hospital every week, gave over 16,000 hours and shopped for over 15,000 patients.

tients.

Recreation Starts at 1300

The hours of 1300 to 1400 signify the beginning of activities of the ARC recreation department. The 16mm movies that are shown on the wards and the equipment are furnished by the Red Cross. Projectionists are patients who receive a nominal fee for each showing.

Other volunteers from Chicago, Waukegan, Rockford, Gary, Moline begin to gather in the Red Cross recreation office to receive their instructions before taking their entertainment or parties to the wards. Approximately 3,500 different entertainers visited the wards last year.

Ward entertainmen or parties are carried out on the wards during the hours of 1400 to 1600 and 1900 to 2030. The popular activities for patients and hostess groups alike are the ward parties sponsored by the college groups of Northwestern and Chicago Universities, Mundelein, St. Xavier, Barat and Lake Forest Colleges. About 800 young women from these colleges were hostesses during 1951.

Gray Ladies Teach Handicraft

For the bed ridden patient who finds time heavy on his hands, the Gray Ladies trained in teaching handicraft visit the patients, furnish the materials, and teach him how to make belts, to weave and perhaps become acquainted with the craft of leather tooling.

Planned and directed by the ARC staff, and with the assistance of the volunteers, 2,745 recreation activities were scheduled for the wards.. Other recreation activities that proved popular with the patients are the utilization of hobby groups, including the stamp collectors from Evanston Stamp club who visit the hospital every Monday night, the members of the Chess club that visit every Friday night to play with Chess fans, and Mr. Collis, who for several years has taught the patients the fine are of fly-tying.

Basic supplies for the development of these hobby programs are

In-Service Training Program Refreshes Hospital Corpsmen

The Hospital Corps In-Service training program has been functioning under a full time staff of instructors for 17 months. During this time, both the program and instructors have suffered many growing pains.

In November 1950, when the In-Service program was re-established, its purpose was to supplement the Hospital Corps School course and to act as a refresher course for recalled reservists. Instruction of ward corpsmen was concentrated on basic ward procedures. Men in the higher rates were taught hygiene and sanitation, pharmacy, and the functions and record keeping of various hospital departments.

On 1 February 1951, the curriculum was geared toward preparing men for advancement in rate. The courses presented were anatomy and physiology, nursing, first aid and minor surgery, hygiene and sanitation, pharmacy, and naval customs and traditions.

Last June, a test comprising these subjects was given the staff corpsmen. Men were then assigned classes based upon the results, their needs, and preferences.

This schedule worked effectively until working hours were changed early in August. Classes again had to be revised and except for minor changes to include special lectures and films on safety, Radiological Defense, Artificial Respiration, and new scientific developments, they have remained substantially the same.

Must Attend Classes

At the present time all staff corpsmen, HA's through HM2's are required to attend classes at least two hours each week. HM1's and MCH's attend special scheduled sessions.

Lt. Ethel J. Pasternack, NC, USN, is in charge of program planning. She was assigned her present position shortly after her arrival here in September, 1950. Lt. Pasternack is a graduate of the Meriden Hospital School of Nursing in Connecticut and of the New York University School of Education. Her varied nursing experience includes head nurse and supervisory positions.

Most of Lt. Pasternack's civilian work was in the field of research at NYU's department of therapeutics at Bellevue hospital, and its Medical Research Service at the Goldwater Memorial hospital in New York City. Prior to her separation from active duty in 1945, her Naval service included duty at St. Albans, San Diego Area Hts. and Hilo, Hawaii.

For the past 17 months, Lt. Pasternack has taught basic and advanced nursing procedures, first aid, nursing aspects of atomic warfare, and materia medica.

Served Aboard LST

Richard C. Christian, HM2, is senior instructor of the department. A graduate of the University of Illinois, he completed one year at Northwestern Law School prior to his recall to active duty in February, 1951. His Naval service during WWII included duty aboard an LST in China and the Pacific. Christian attended the Navy Instructor School at Norfolk, Va. in June, 1951 and was graduated third in a class of 30. Since his return he has been teaching first aid and minor surgery, and armed forces talks.

William F. Wickstrom, HM3, the department's "visual aids" man, is a graduate of Northwestern University where he majored in speech. Wickstrom, before his recall to active duty last March was employed as radio announcer for station WMUS, Muskegon, Mich. His Naval service during WWII included duty tours at USNH and USNTC Newport, R. I., and 21 months aboard the USS Bon Homme Richard CV 31, then with Task Force 38 in the Pacific.

Wickstrom captured top honors in his class at the Navy Instructors School, Norfolk, Va., and teaches hygiene and sanitation, naval orientation, and naval history. Both he and Christian were awarded letters of commendation by Capt. T. F. Cooper at Meritorious Mast for their outstanding work at the Norfolk school.

Studied at Illinois

Dan Brusalan, HM3, since March 1951 the department's attorney, received his education at the University of Illinois and his law degree at Chicago Kent College of Law. He is a present member of the Illinois State Bar Assn. He has studied the Uniform Code of Military Justice extensively, and has presented the Code in a series of lectures to the staff HMC's and HM1's as well as in intermittent lectures to men of other rates.

Brusalan also conducted a USAFI course in Business Law on his off duty time. He is unofficial legal counselor for staff and patient personnel and has represented many of them in the civil courts as well as advising them on personal legal problems.

Richard J. Kehoe, HN, although recalled to active duty in January 1951, was added to the department last August. He possesses a BS degree in Zoology from Michigan State College. Kehoe teaches anatomy and physiology and takes care of all class records. He spent 31 months in the Navy during WWII, part of that time as a corpsman aboard the USS Mindoro CVE 120.

Carol Channing, star of "Gentlemen Prefer Blondes," poses with a group of staff members and patients of the hospital, "After the Show" in a Chicago Theater. The servicemen were guests of a Chicago fraternal organization which had supplied the tickets to the show.
12 December 1951

10 FEB 51
KOREA VETERANS PRESENTED PURPLE HEARTS

Twelve hospital corpsmen headed by Ens. Jack H. Gehring MSC USN were flown from the Naval Air Station, Glenview, Illinois on 8 August 1952, to Sioux City, Iowa to help in that area's polio epidemic. Secretary of the Navy Dan A. Kimball ordered the group to Sioux City. The plea for Navy aid was sent through Congressional Channels.

uilding 68, large brick garage on which construction was started 7 February 1942 and complete out 16 June 1942; put into use 30 June 1942. Its dimensions are 168' long x 66' wide x 25'6 gh. Living quarters are provided above for civilians assigned to the Transportation Departm

rking lot of 67 spaces next to the Gate House which accommodates cars of personnel rking or quartered in surrounding buildings, as well as space for visitors.

tenance Building 57. The shops in this building were moved there in 1940 and greatly ased the efficiency of the Maintenance Department. This one-story building originally ed the medical stores-room and was built in 1928. It is 100' long x 40' wide.

ndry Building 53 to the far left is a large "H" shaped brick building located on the southern rtion of the reservation. The west wing contains the washing machines, centrifugal wringers, oning tables, presser and water softener. The connection between the wings is occupied by a rge mangle. The eastern and smaller wing of the building contains linen storage for issue to ospital departments, and the sewing and repair room. At the north end of the west wing there e two compartments, between the walls of which are located two large autoclaves for sterilizing additions was built and placed in operation the early part of 1943, and the laundry is adequate the requirements of the hospital.

Bridge over the ravine. This is looking toward the Hospital Gate on "D" Street. Construc
was started on 5 November 1942 and work was completed on this bridge 1 April 1943.

iew of Wards 73 North and South and 74 North and South which Ace Sixth Street. Work on these
ildings was started on 30 December 1941 and completed about 15 April 1942.

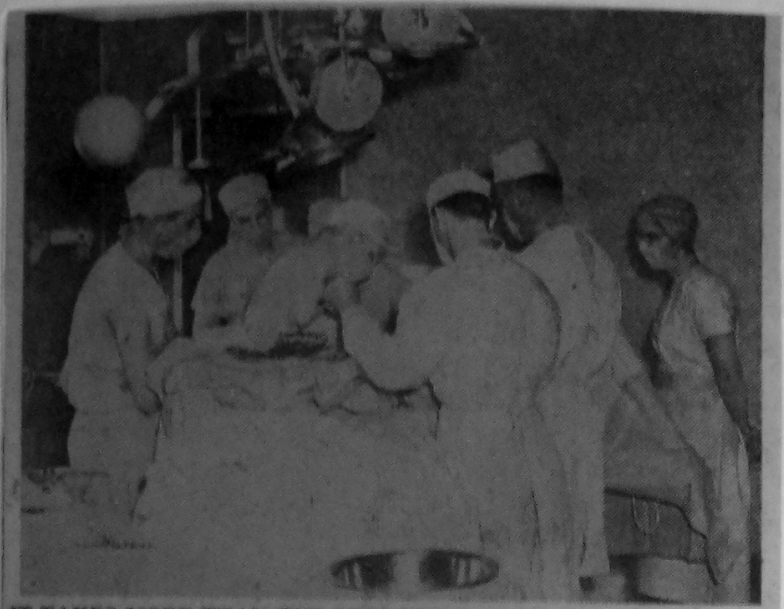
Approaching the U.S. Naval Hospital, Great Lakes, Illinois, on U.S. Highway #42

Quarters C of the Executive Officer of the U.S. Naval Hospital, Great Lakes, Illinois, constructed in 1909. With the sun-porch extension made in 1928, it is now 72'7½" long x 39' wide x 36' high.

Work commenced on 19 February 1942 on the brick Officers Quarters H, I, J, K, L, M, N, O, P and [illegible], and this apartment-house style building was completed 30 July 1942. These quarters were completely occupied for the first time during the month of January 1943. The dimensions are 75'6" long x 23'6" wide x 28' high each.

View of wards 92 North and South, 93 North and South, and 94 North and South, looking south from the bridge on "D" Street. The dimensions of the wards are 200' long x 28' wide, and they are one-story buildings. The normal capacity is considered to be 28 with an additional 5 beds in quiet rooms, making a total of 33 beds.

View of "F" Street looking east from Eighth Street. Ward 65 South is to the near left, while Barracks 66 is shown to the near right.



IT TAKES MORE THAN THE SURGEON to make an operation successful. Shown above is the trained team of experts that assists in operations at the U. S. Naval Hospital. To ensure the safety of patients, the operating room contains the most modern medical equipment available.

Operating Room Team Takes Every Precaution

Many people have a dread of operations. And many operations are complicated processes which may last several hours. However, anyone who has observed an operating room team at the U. S. Naval Hospital comes away with the feeling that the hospital has done everything possible to ensure the patient's recovery.

A surgeon and assisting surgeons are pre-assigned to each operation. These surgeons have vast experience in the type of operation they will perform.

The anesthetic for the patient is taken care of by a highly trained anesthetist, either a doctor or registered nurse.

One or more operating room technicians will be designated scrub technicians for the operation. The technician must make himself sterile in all respects to aid the surgeon and assisting surgeons in the operation. He must be familiar with all instruments, sponges, sutures and other equipment which the surgeon will call for during the operation.

"Circulating" Technician

In addition to a scrub technician a "circulating" technician is designated for each operation. Although not in sterile garb himself, he plays an important role. He is in the room during the operation in the event that anything must be obtained from outside the operating room.

The scrub for the surgeons and scrub technicians before the operation is a complicated process. The arm from the elbow to the finger tips is scrubbed for a period of 10 minutes with a special bacteria destroying ingredient. The soap must be washed from the arms and hands in such a way that the unclean water does not wash over a scrubbed area. Fingernails must be short and clean and every crevice of the hand, fingers and nails must be gotten to in the process.

Special Ingredient Used

As another precaution a special ingredient is swabbed into the operating room floor during the morning and evening cleaning. This ingredient makes the floor highly conductive to electricity.

During the operation the surgeon and assistants are fitted with a special ground which is attached to the leg and grounded to the floor to absorb any electricity in the body itself. This must be done to safeguard the patient, who is absorbing oxygen which could be ignited by a body spark.

The operating room technician has six months of rigid theory and,

practical training and assists in operations during the latter part of his training period. He stands a three section watch and must be readily available at any time during his duty period. Seldom does a duty period pass that he does not assist in an operation.

Naval Hospital Clinical Laboratory Is Vital Link in Medical Chain

The Naval Hospital Clinical Laboratory is headed by Lt. Cmdr. R. B. Fuller, MC, USN. The pathology and histology department is under the supervision of Lt (jg) E. Dyer, NC, USNR. This department is directed to the preparation of various tissue specimens for microscopic examination by Dr. Fuller, who is also the pathologist.

This preparation of tissue is an extremely involved and technical process which begins at fixation in a 10 percent formaldehyde or other special solutions. Then through a number of other solutions ending in embedding in paraffin. The specimen is then placed in the microtome, a precision instrument which cuts the specimen into extremely thin sections of some 5 microns thickness, some idea of their thinness may be gained by thinking of a human hair as being on the average of about 25 microns in diameter.

These sections are then mounted on a glass slide and carried through an intricate staining process involving as high as 17 solutions or more. The specimen, after being covered with a preservative material and a glass cover slide, is ready for examination. In emergency cases where speed is essential the "frozen section" process is used, this is accomplished by freezing the tissue with carbon dioxide gas. While frozen the section is cut and then stained in the same manner, but in an abbreviated form. These procedures are invaluable as they furnish the only methods by which the various malignancies can be diagnosed or ruled out.

Chief Allen Supervises

The remainder of the laboratory is under the general supervision of B. F. Allen, HMC. This supervision covers the departments of haematology or the microscopic study of blood, bacteriology, biological chemistry, blood bank and parisitology.

R. Wein, HM3; R. J. Hamalle, HM3; and R. J. Delaney, HN, are the haematology technicians. Their work consists largely of red and white blood counts, haemoglobin determinations and blood smears to study and report the type, maturity and percentage of various blood cells. Ordinarily, upon admission, all patients have this study included as part of their clinical history to determine if any abnormality exists. The white blood cell count and red blood cell count is a particularly valuable diagnostic aid for the various infectious diseases and processes such as appendicitis and pneumonia, and in general to determine the bodily resistance to such processes and infections.

Blood Bank

The "blood bank" is under the charge of Maxine Katcher, HM1. This bank has a turnover of some 34,000 cubic centimeters of blood a month. The blood is a voluntary contribution by men undergoing recruit training. A vote of thanks can well be given these men for their contributions, for their blood is used not only as a life saving measure in cases of hemorrhage, but as a measure to sustain strength, to hasten recovery following major surgery and in some cases as a tonic.

The physiological chemistry department is manned by D. Roush, HA. The work consists largely of chemistry of the blood and detection of abnormal amounts of any of its chemical constituents. In diabetics for instance the blood level of sugar is higher than normal and by chemical analysis it can be determined the severity of this disease. This particular test is modified to include a so-called "sugar tolerance" test to determine the amount of sugar that can be utilized by the body in a given time. The detection and progress of many other diseases is also determined by blood chemistry analysis.

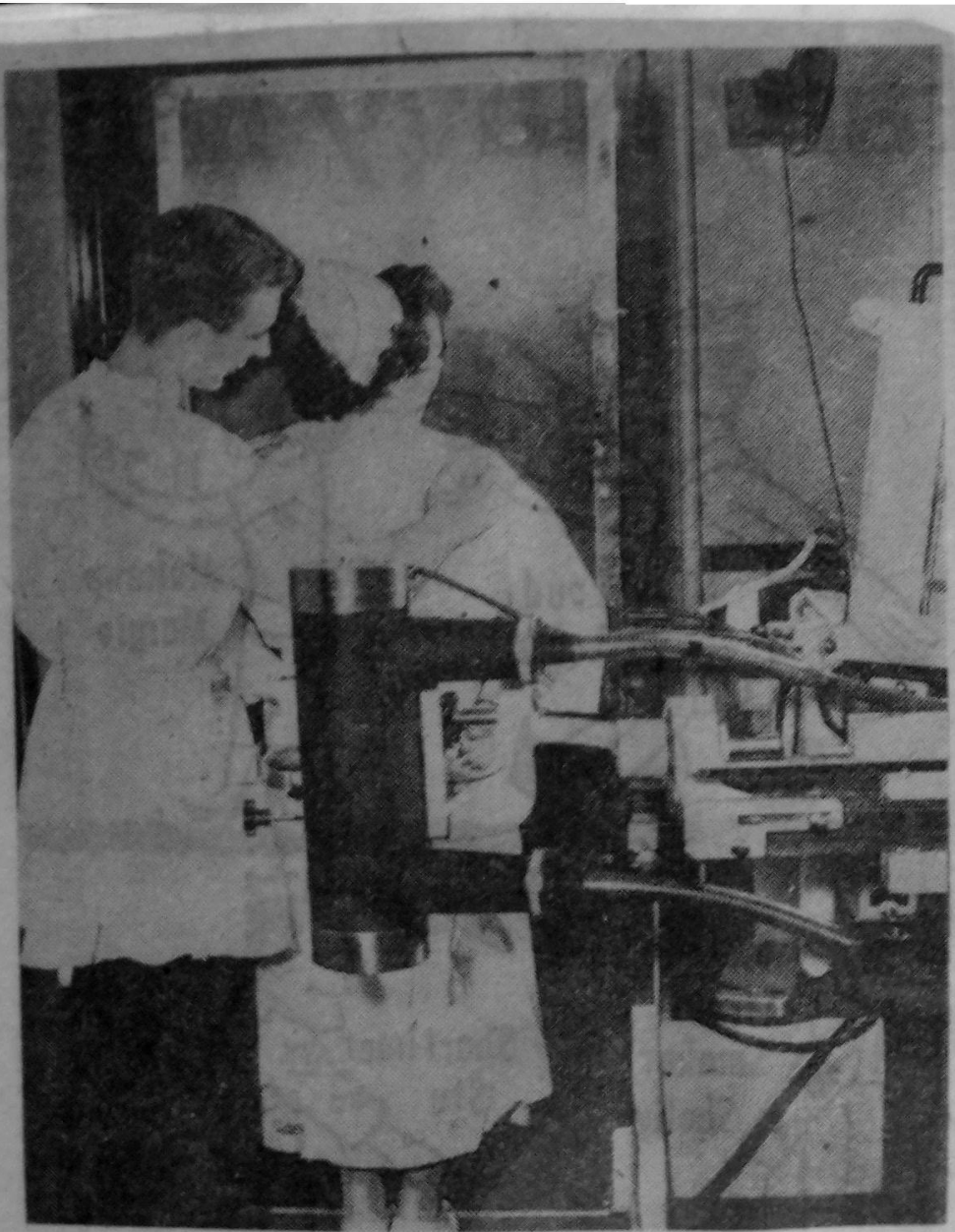
Serology

Serology, or the study of blood serum, encompasses such procedures as the Kahn, a widely used diagnostic test. The various agglutination tests which aid in the diagnosis of bacterial infections which can be demonstrated through the anti-bodies which these bacteria cause the body to create, are also done in this department.

The bacteriology technician is Wave Pat Healy, HN. It is in this department that all cultures and identification of various bacteria are done. Cultures are now done, for the most part, on media that has been prepared commercially. This media is dehydrated to a powder and it only remains for the technician to add water, adjust the media to the proper acidity, or alkalinity tube or plate and sterilize. In identification of organism causing food poisoning the organism is identified by its ability, or lack of it, to grow or ferment the various types of sugars or polysaccharides.

Technicians Are Important

The field which is within the scope of the Navy clinical laboratory technician is almost without limit. During and since the war this field for technicians has broadened to include duty at one of the several research units under the direction of the Navy Bureau of Medicine and Surgery, in hospitals in the United States which may be devoted to the care of a particular type of patient involving advanced laboratory study. In hospitals overseas where the care of indigenous population presents special problems. The role of the technician in determining the effects of radiation on humans or animals is also a role of the laboratory technician.



X-RAY TECHNICIAN DAVE LINBERG, HM3, readies a nurse corps indoctrinee for a routine X-ray examination. Linberg is a registered X-ray technician at the Naval hospital.

Hospital's Medical Repair Unit Only One in 9th Naval District

Ever wonder about who fixes that X-ray machine or the ultra-violet lamp they used to examine or treat you with the other day? Well, here is your answer. In Hospital, Bldg. 90 you'll find the Medical Repair Unit—the only one in the Ninth Naval District.

It is under the charge of CWO L. J. Clark, HC, USN, and manned by J. W. Thompson, HMC, USN, and L. H. Newton, HN, USN. CWO Clark and Chief Thompson are graduates of the Joint Army and Navy Medical Materiel School located in St. Louis, Mo. A prerequisite to entry in the school is that the candidate must be an X-ray technician or have had equivalent training. This school qualifies its graduates to install, maintain and repair all electro-medical and dental equipment, together with all other equipment used in a medical or dental activity.

Repairs Many Items

At first thought this may not bring to mind many things but it includes such items as X-ray units, diathermy or short wave therapy units, anaesthesia apparatus, all eye, ear, nose and throat diagnostic and treatment apparatus, basal metabolism units, blood transfusion apparatus, sterilizers, oxygen tents, dental units, operating room tables, infant incubators, ultra-violet lamps, blood pressure apparatus, microscopes, movie projectors, centrifuges, resuscitators and microtomes. This latter is a precision machine or instrument which is used to cut tissue imbedded in paraffin into slices one-fifth the thickness of human hair. This tissue is then mounted on glass slides and stained in order the cell structure can be studied by the pathologist to determine the presence of cancer or any other cell abnormality.

In civilian institutions, care and upkeep of this type is usually done by the representative of the various manufacturing companies or installation concerns. In the Armed Services it is necessary to train men to repair any type of medical materiel whether in an established hospital or a field unit powered by its own gasoline engine.

Installs X-Ray Unit

As a proof of their skill and training this unit has recently installed a 500 milliampere centralinear control X-ray units in Bldg. 1109, Naval Medical Research Unit No. 4, which has two tubes making it possible to be used for both X-ray pictures and fluoroscopy. In fact you might go by one morning and find Chief Thompson assisted by Newton working on an electrocardiogram apparatus and the following day find CWO Clark deep in the "innards" of the diathermy or short-wave therapy machine. In fact if you ask them, they'll tell you they can adjust, repair, install and build "darn near anything." Chief Thompson's next project is to build an "electrical heart" to test electrocardiograph machines.

24,698 Examined by X-Ray At Hospital in Past Year

The history of X-ray dates back to 1895 when Wilhelm Roentgen, of Germany, demonstrated the ability of a new ray, the X-ray, to penetrate different substances, including the human body, producing shadows of varying degree on a photographic plate. He discovered that the varying shades of the shadows depended upon the density of its component part.

The story leading to the discovery of X-rays and radioactivity is startling in the control of electrical energy and of electrical discharges through vacuum tubes. It was culminated with the invention of radium and the development of our present atom bomb.

X-rays are produced by high energy electrons in the order of 100,000 up to 2,000,000 volts. These electrons are defined as small particles of electricity generated in a field of high electrical potential.

Cdr. Burroughs Heads Service

The equipment in the X-ray department of the Naval Hospital, which is under the direction of Cdr. C. D. Burroughs, MC, USN, consists of six diagnostic machines, five mobile units used on the wards, one deep therapy unit and a superficial X-ray therapy unit.

During the past year a total of 24,698 examinations were conducted by this department, involving 22,640 patients. In addition, 1,561 patients were treated by radiation therapy. These patients are from the Naval hospital, and other medical activities in the Ninth Naval District.

The Hospital Corps students and rated technicians assigned this department are responsible for all phases of work in the production of finished X-ray film.

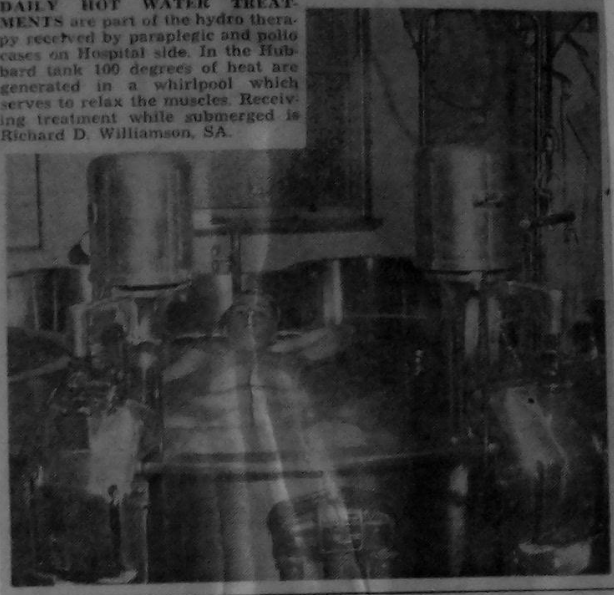
Students who show an aptitude for this work are placed under instruction for a period of six months. After this time, providing their work is satisfactory, they are recommended to the Bureau of Medicine and Surgery for issuance of a Navy certificate in this specialty. This training also makes the hospitalman eligible for registry by the American Registry of X-ray Technicians.

Approved for Training

The department is also approved for residency training for medical officers in the field of radiology. While no medical officers are assigned to the department as residents at present time, two are getting credited training for the time they will spend in the department. One is a Greek Naval physician assigned to the department for a year of training.

The X-ray is an invaluable aid in the diagnosis of disease processes within the body. Diseases which would not be suspected in early stages by routine physical examination are readily diagnosed by the use of X-ray.

With outstanding results recorded in the records, it is understandable why the Navy Department takes pride in the X-ray installations in the various Naval hospitals throughout the country.



DAILY HOT WATER TREATMENTS are part of the hydro therapy received by paraplegic and polio cases on Hospital side. In the Hubbard tank 100 degrees of heat are generated in a whirlpool which serves to relax the muscles. Receiving treatment while submerged is Richard D. Williamson, SA.

Physio Therapists Treat 65 Patients Daily at NH

A daily average of 65 patients are treated in the Physio and Hydro therapy department on Hospital side.

Patients are treated by exercise, water and heat applications for sprains, strains and other muscular disorders.

Largest piece of equipment in the department is the Hubbard tank, a huge aluminum container filled with water heated to 100 degrees and circulated with two whirlpool devices.

The patient is stretched out on a canvas conveyor and lifted into the tank by means of a hydraulic jack. The therapy is used for paraplegic and poliomyelitis cases.

Other hydro therapy equipment used in the department include arm and leg whirlpool tanks.

In a separate room is the rehabilation section of the department which houses weights, stationary bicycles, stair climbing devices, and large wheels attached to the bulkheads which are used for shoulder exercises.

A shortwave diathermy machine produces infra red light which generates superficial heat to relax a patient's muscles. This treatment is generally followed by a massage by one of the staff attendants.

The Sinosuidal wave machine stimulates by electrical impulse nerves and muscles in a patient's body to see if they are still alive.

Another heat treatment which has been found successful in the rejuvenation of muscles is the paraffin bath. A tank of paraffin is heated to the boiling point, then the patient inserts his head or arm and extracts it. This leaves a wax coating which sends the heat inside.

Members of the department include Lt. E. Rosevear, NC; Lt. (jg) R. Kelly, NC; C. C. Chesser, HMC; A. M. Hagopian, HMC; M. Schlein, HM2; M. K. Cutler, HM2; N. I. Hanka, HM2; D. L. Rutemeyer, HM3, and W. M. Woods, HM3.

Brain Electricity Measured As Key to Mental Illnesses

Measuring brain waves may sound like the sort of pastime which would be most at home on a television show, but it is actually a vital part of the neuropsychiatric program at the Naval Hospital here.

The measurement of brain waves dates from 1936, when Dr. Hans Berger recorded the first electroencephalogram, meaning a written record of the brain's activity.

Dr. Berger's discovery stemmed from findings which showed that certain portions of the brain control various bodily functions—voluntary muscular movements, reception of light and noise, etc. Investigators also discovered that nerve tissue, in normal activity, emits electricity. If this electricity could be measured, scientists felt, it could be used as an indicator of brain functions.

From Dr. Berger's finding has come the electroencephalograph machine, an important tool in modern medical diagnosis.

Machine Complicated

The EEGraph is a complicated machine which uses electronic tubes to magnify the brain's electrical activity over 50 million times, so that it can be recorded on specially marked graph paper. The EEGram looks to the untrained eye like a series of weird scratchings on a piece of paper. However, it is an accurate measurement of brain activity.

The recording is obtained by pasting a series of tiny metal discs, called electrodes, to various parts of the patient's scalp. The electrical impulses picked up by the electrodes are transmitted to the amplifying equipment, and then to a series of ink writers which move rapidly back and forth each time they are stimulated by a given amount of current. These write on moving paper, traveling at a preset speed past the delicate pens. The entire test takes about 45 minutes.

Since the electrodes are attached to different areas of the scalp it is possible to localize any abnormal brain activity. In cases of head injury and brain tumors this knowledge is invaluable to the doctor in diagnosing and treating the patient.

Brain Waves Change

Brain waves normally change as a person matures, and in some cases several EEG's are taken to determine a patient's progress.

The machine is not magical and does not tell a person's intelligence level, read his thoughts or diagnose types of mental disease. It merely measures the brain's electrical current.

The measurements are so delicate and sensitive that any bodily movement or mental excitement will change the EEGram. For this reason the test is made in a specially built room which is soundproofed and dark. The patient is frequently made drowsy or put to sleep by pre-medication to eliminate bodily action. Even the movement of a finger shows up actively on the machine.

Technician Important

An important part in the EEG laboratory is played by the EEG technician, who must know how to prepare the patient, apply the electrodes and obtain correct tracings. He must know when disturbing influences appear during the recordings and make proper corrections, and he must also know how to keep the delicate machine in top operating condition.

To train men for this work, the Navy Medical Department maintains three courses at Bethesda, Chelsea and Oakland Naval hospitals for qualified and interested hospital corpsmen.

Naval Hospital's Large Pharmacy Compares With City Drug Stores

The pharmacy at the Naval Hospital compares in volume of business in the number of prescriptions to a large city pharmacy. Leaving out, of course, the notions counter, ice cream sodas, and other items numbering ad infinitum that you usually expect to find in a drug store.

The Navy pharmacies and sick bays lost a note of the unique and a source of mystification to visitors when during the war the old fashioned square glass stoppered bottles with their hand-painted glass labels were discontinued. These bottles have been credited with adding more to the prestige and esteem of the Navy pharmacist's high order of intelligence than any other item. Who could not be impressed when the man on duty in the pharmacy could peruse a prescription which, in itself, appeared completely intelligible, and then out of colorfully labeled bottles with such mysterious Latin names and abbreviations as: Liq., Pot. Arsen, Tr. Hyosc, Oleum Theobromatis and Tincture of Cadamon, and proceed to fill it. No pharmacy man has yet been known to minimize the impression gained by his bottles.

Lee Is In Charge

The Hospital pharmacy is under the charge of Harold M. Lee, HMC, who acts under the general supervision of the pharmacy officer, Lt. E. W. Welch, MSC, USN. The pharmacy is manned by Charles Kolstad and Charles D. Van Soyac, HM1's, and Joseph Landry and William Rogers, HN's. Edward R. Strader, HMC, is in charge of the "branch" at Dependent's Care Service.

The normal stock of drugs ordinarily exceeds 500 items. These include items received from the joint Army-Navy procurement activity in Brooklyn, N. Y., and those bought on the open market to meet the needs of particular patients. The catalog of medical materiel offers such a diversified list of items that it is not ordinarily necessary to procure items locally

The procedure for issue of drugs is the same as followed at all Naval hospitals. All wards and clinics have a drug book in which the daily needs are written and signed by the ward medical officer which is brought to the pharmacy. This procedure is used except in the cases of narcotics, alcohol or other drugs which require a prescription to insure strict accountability in compliance with the Harrison Narcotic Law.

Except during the late war, all Navy pharmacies have been under the charge of men who have been strikers in the pharmacy, and thereby gained a working knowledge of compounding and dispensing or are graduates of the Naval School of Pharmacy and Chemistry at the National Naval Medical Center near Washington, D. C.

What It Means

The word pharmacy is used to name the science which treats of medicinal substances. This field of science encompasses a number of the other sciences which are related in the study of drugs and medicinal substances. Some of the related sciences being botany, mineralogy, zoology, physics and chemistry. Then these sciences are further broken down into pharmacognosy, toxicology, bacteriology, pharmacodynamics and pharmacology. In consequence the hospital corpsmen entering a pharmacy for the first time on duty has a long road to travel to learn the absolutely necessary rudiments before he can be trusted to dispense and compound drugs without endangering life.

Doctor Is First Wave To Take Internship Here

For the first time in the history of the Great Lakes Naval Hospital a woman doctor who holds a commission in the Waves is serving her internship there. Something new to the entire Navy, a number of women graduates of civilian medical schools have been commissioned as interns with the rank of lieutenant (junior grade) in the Naval Reserve.

Assigned to the Naval Hospital here is Lt. (jg) Mary Weatherly Tilden, MCW, USNR, who will complete her internship on 30 June 1950. Dr. Tilden, of Richmond, Va., is a graduate of the University of Virginia College of Medicine.

Doctors, both male and female, interning as Naval Reserve officers at either civilian or service hospitals receive practical training in virtually all fields of medicine open to civilian interns, placing special emphasis where possible on problems prevalent in Naval medicine.

Although the Navy is short of doctors, some Navy interns must be assigned to veterans' hospitals and civilian institutions rather than to Naval hospitals because medical standards limit the proportion of interns per resident. Navy doctors who intern at civilian hospitals are considered on active duty and are in a pay status, but must agree to remain on active duty for a period of two years upon completion of internship. During this tour of active duty they are assigned to large Navy hospitals or to dispensaries at Naval installations not near a hospital and have an opportunity to apply for commissions in the Medical Corps of the Regular Navy. Those who intern at Navy hospitals may request inactive duty upon completion of their year's internship if they so desire.

Great Lakes Bulletin
of 3 August 1951

More Liberty to Corpsmen

More liberty was granted to Hospital Corpsmen third class and below by a hospital notice which became effective Wednesday at the hospital here. Lower rated men are now on a three section watch.

The six section duty watch for Hospital Corpsmen first class continues as before, but Hospital corpsmen second class have been reduced to a four section duty watch.

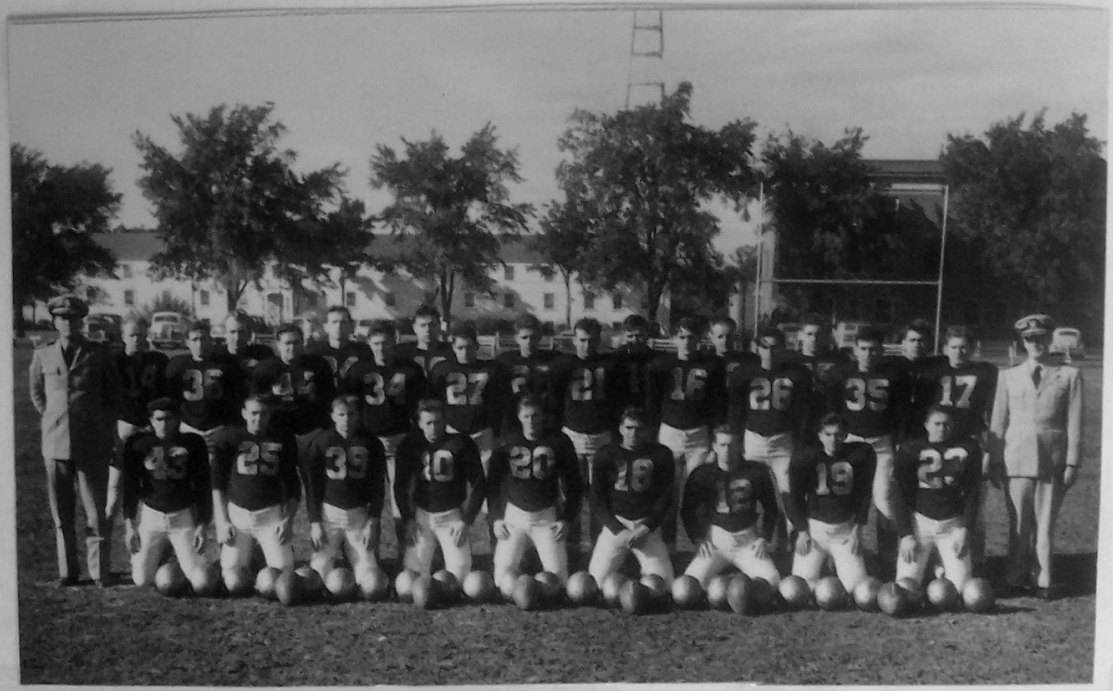
Changes are effected in the interest of the enlisted personnel of the command since it was felt that the average hours of 70 a week for corpsmen of lower ratings was not in the best interest of health, work, efficiency or morale.

Waves Barracks 104H is a two-story building 168' long x 100' wide completed 11 January 1942 and occupied during February. This building was used originally by the Hospital Corps School and for staff corpsmen. Conversion to Waves Barracks was completed during April-June 1945; it has been occupied by Waves since about August of that year.

outstanding duty. Captain D.W. Lyon, also awarded a

RECREATION ROOM BLDG 66 CORPSMEN QUARTERS

Barracks 67, Hospital Corpsmen Quarters was started on 15 December 1941 and was completed on 28 March 1942. This building is located on Eighth Street next to "G" Street and is directly across from Barracks 66.



NAVAL HOSPITAL ELEVEN-MAN SQUAD—Ready for their first game of the season is the Naval Hospital's first eleven-man football team. Pictured from left to right are: (kneeling) Diatolevi, Hayward, Anderson, Bigoness, Heaton, York, McAvoy, DiCicco, Kreske. First row: (standing) Captain J. Q. Owsley, MC, USN, Medical Officer in Command, Weir, Hegelstine, Kerr, Hougtgen, Teich, Siebert, Cook, Cavalero, Hager. Captain D. W. Lyon, MC, USN, Executive Officer. Back row, Walker, Rogalinski, Fredericks, Steitz, R. J. Smith, J. F. Smith, Shields, Koons, and Pollick. Some members attending the Hospital Corps School were not present when the picture was taken.

Hospital Football Schedule

Kickoff time for all games: 1400

23 September	Lake Forest College	Here
30 September	Fort Sheridan	There
7 October	Northern Illinois State College De Kalb, Illinois	There
14 October	Northern Illinois State College De Kalb, Illinois	Here
21 October	Lewis College Lockport, Illinois	Here
11 November	Fort Sheridan	Here

Bldg. 80 Is Scene Of Hospital Ward Ping-Pong Finals

After three days of toe to toe battling, the inter-ward ping pong tournament came to a close last week.

Sponsored by the Red Cross at the Hospital, the play-off lasted Monday through Thursday, and because of the heated games that were played during the earlier tilts, the finals were held in the gymnasium in Bldg. 80.

Pfc. J. J. Carroll, patient in Ward 84-N, took the situation well in hand and walked off with the singles crown.

Ward 65-S was well represented in the doubles tournament, and the team of A. Seibert, HN, and Cpl. Harry N. Miller, proved to be the best.

Loren S. Johnson, HM2, from the Recreation Office, is still receiving orchids for the splendid job he did in officiating the games.

Hospital Softball Squads Turn Out For First Practice

The Hospital softball league opened its season with the cry of "play ball" last Sunday.

The turnout for this first practice was far greater than expected, and consequently the Welfare and Recreation Department has been having trouble issuing sufficient uniforms and gear to outfit the teams.

The only "balk" to date has been called on the weather man. It seems that he conspired against everyone by not allowing the field to dry up enough to lay out the diamond.

It also looks as though the plan of only three teams taking part in the playoffs will be changed. In addition to the port, starboard and special departments teams, the Waves, Nurses and staff officers are also planning to enter the league.

With these additions it will be necessary for the schedule to be revised, it was announced by M. E. Dodson, HMC, of the Welfare and Recreation Department.

Scene from the game between USNTC and USNH, Great Lakes, Illinois, played in the Gymnas
Building 80, on Tuesday evening, 10 January 1950.

Afternoon Game To Open Season For Corpsmen

The Hospital football season gets underway this afternoon at 1400 on the Hospital athletic field when the recently organized squad takes on the visiting Lake Forest College "B" team. Today's opener promises to be a real test for the Hospital lads who are playing together for the first time against competition.

Lt. John Nuckel, CEC, USN, coach, will field a scrappy outfit averaging close to 190 pounds per man. The Hospital line tips the scales at an average of 195 pounds, the backfield, 178 pounds. Today's probable starting lineup will be:

Position	Name	Duty	Weight
LE	Kreske	Hosp	154
LT	Stalnaker	HCS	225
LG	Lauff	HCS	180
C	Hegelstine	Hosp	209
RG	Morris	HCS	183
RT	Steitz	Hosp	216
RE	Purcell	HCS	200
QB	Snyder	HCS	190
LH	Cavalero	Hosp	165
RH	Pollick	Hosp	175
FB	Smith, J. F.	Hosp	185

The game today culminates a month of preseason training for the Hospital squad. While few of its members have played college football, almost all have had considerable experience in high school competition.

The "Foresters", coached by Mr. John Breen, are at this writing, an unknown quantity. It is rumored that they are big, smart, and especially adept at backfield ball handling, running their plays from a T-formation.

Plan to see this game and the other home games scheduled this season. The Recreation Officer announced today an addition to the schedule printed in last week's BULLETIN. The Hospital will play St. Ambrose College on 5 November at Dubuque, Iowa.

Picture of the Gymnasium before it was modernized.

Building #2 faces Fifth Street and is bordered on the right by "I" Street and on the left by "D" Street.

Hospital Music Room is Source of Entertainment

Since inauguration in 1942 by the Great Lakes Music League, the Naval Hospital Music Room has been a constant source of entertainment and pleasure for patients and staff alike.

The first aim of the Music League, which draws its membership largely from the Winnetka area, in establishing and furnishing the room, was to encourage a greater understanding and appreciation of the classics.

Located on the second deck of Recreation Building 82, there are nearly 2,000 classical and over 250 popular and western records in the room.

Hanging on the walls of the recently redecorated room are paintings which depict various compositions by Beethoven, Dvorak, Sibelius, Bach, Tschaikowsky and Chopin.

Private rooms, equipped with a record player and several chairs, are also available for those who would prefer to listen to music of their choice alone.

The sponsors of the Music Room are also responsible for monthly concerts which are held during the winter months. The internationally known pianist, Jose Iturbi, was one of the musicians sponsored by the group.

In the main room a grand piano is available for use by anyone, as is an upright piano in one of the adjoining rooms. The upright is often used by those taking piano lessons.

The most recent, and one of the most appreciated, additions to the Music Room is a console radio-record player, with two FM bands and the new long-play turntable for playing micro-groove records. This instrument was a gift to the Music Room from Mrs. Burnett of Winnetka who is vice-president of the Music League.

Another feature available to music lovers is the record library which lends records for one-week periods. Patients and staff members can draw records for playing in wards, homes and quarters.

Hospital Gauzette

After many moons of inactivity the stage located in the theatre of Bldg. 82 came to life with a bang last Thursday when the entire floor show from the Chez Paree visited with us. The show was a little late in starting, but once it got underway the performance was well worth the slight delay. The program started off with Cee Davidson's Orchestra playing a well rounded selection of popular music with some clever antics from various band members. The mixed chorus gave out with a Country Fair dance with more enthusiasm than we ever thought possible. Following the dance the **Allen Sisters** gave out with some sweet and hot lyrics that had the male portion of the audience drooling and yelling for more. About that time the stars of the show arrived and immediately brought the house down. **Dean Martin** and **Jerry Lewis** put on an inspired performance that has had the hospital buzzing since. Never before had our stage and audiences heard such a collection of fine razor sharp wit and ab-libbing as that dished out by those two fine comedians. From the time of their arrival until the closing band number there was never a dull moment. **Jerry Lewis** joined the **Four Step Brothers** in their dance routine and did a creditable job with those excellent dancers. The show lasted for an hour and a half and would have gone on for a much longer time except that the performers had other obligations to meet prior to their regular evening show at the Chez Paree. It's conclusion left us a little breathless and with a warm glow of satisfaction that comes only from watchin' a truly marvelous, artistic performance by the very best in show business. On behalf of the entire Hospital we wish to thank all those wonderful people who contributed their time and efforts in making the show a standout performance in the history of the Naval Hospital.

Hospital Opens 'Special' Theater

Captain J. F. Hooker, MC, USN, Medical Officer in Command, Naval Hospital, formally opened the new hospital theater, the first of its type in the nation, during ceremonies in Bldg. 82 Tuesday night.

Guests at the rededication of the modern auditorium included Rear Admiral J. Cary Jones, USN, Commandant, Ninth Naval District; Rear Admiral F L. Conklin, MC, USN, District Medical Officer; and Captain H. J. Grassie, USN, Commander, Naval Training Center.

Located in Bldg 82, and remodeled at a cost of over $60,000 in welfare funds, the theater provides special accommodations for wheel chair, stretcher and crutch patients. It will seat 14 wheel chair or stretcher patients and their attendants, more than 50 crutch cases, and 567 additional ambulatory patients and staff members.

During his dedication address, Captain Hooker mentioned the fact that because of the facilities for stretcher patients, two of the men in the theater were seeing a movie for the first time in three years.

At the completion of the ceremony, Captain Hooker turned the theater over to Captain D. W. Lyon, MC, USN, Executive Officer of the Naval Hospital, who in turn placed Lt. E. W. Welch, MSC, USN, Hospital Recreation Officer, in charge.

A stage and screen show for hospital patients and staff, and guests, followed the ceremonies. The stage presentation was MC'ed by Pat Murphy of television fame and featured singer Johnny Desmond with Jack Fascinato at the piano, and the three Bennett Sisters. Music for the affair was furnished by the Great Lakes "NauTiCal Notes."

Auditorium recently modernized by the Benjamin Chemars Company is shown above. This project was begun 1 November 1948 and it was re-commissioned in ceremonies held on 8 March 1949.

Shown above are the accommodations for crutch and wheel chair patients at the new theater in Building 82. The theater seats 14 wheel chair or stretcher cases and their attendents, more than 50 crutch cases, and 567 additional arbulatory patients.

The Library in Building 82.

Hospital Cagers Lose to Glenview

Last Tuesday the Naval Hospital team ran into a small but fast basketball team at Glenview and returned home on the short end of a 50 to 47 score. Leading throughout the first half with the half-time score of 25 to 23, the Hospital Hoopsters lost the lead in the fourth quarter as long shots by their opponents spelled their doom. Personal fouls ran high that night, 47 of them. They were registered faster than baskets and because of it the game was slowed down quite a bit. Burt Shields again led the Hospital Hoopsters with 14 points and Traster followed him with 13 points.

A great blow was struck the Hospital basketball team when Burt Shields was sidelined with a severe knee injury. It is doubtful if Shields will be able to play for the rest of the season.

Bukowski and Akens were the high point men for the Glenview team. Toepper, a small ball of fire, was continually in the Hospital's defense and offense, breaking up many a scoring threat.

USNH	B	F	P	Glenview	B	F	P
Shields	7	0	14	Cech	4	2	10
Henry	0	1	1	Baysinger	1	0	1
Traster	4	5	13	Pirog	0	0	0
Kellums	1	0	2	Manika	2	0	4
Murrillon	2	1	5	Nijano	0	0	0
Robinson	3	0	6	Bukowski	2	3	7
Bryant	2	1	5	Romgrio	1	3	5
Sampson	0	1	1	Toepper	2	3	7
Edwards	0	0	0	Flynn	0	0	0
Bell	0	0	0	Akens	4	1	9
Jones	0	0	0	Van Dupen	3	0	6
Smith, R.	0	0	0	Knowles	0	0	0
Smith, J.	0	0	0	Bass	0	0	0
Tots.	19	9	47	Tots.	19	12	50

Hospital Tops NAS Olathe Cagers; Throws Center Into 9ND Loop Tie

The Ninth Naval District basketball league took on a new aspect this week as the third place Naval Hospital cagers upset heretofore unbeaten NAS Olathe, 59-48, on the Hospital court Wednesday night.

NTC Great Lakes strengthened its second place hold last week by downing Glenview, 48-41. Both Olathe and the Hospital have to meet the Center squad to finish off their league schedule, the former in the crucial match for first place. The locals were scheduled to play Columbus last night to round out their three games left in league play.

After the Columbus match, Great Lakes will travel directly to Kansas City where they will meet the Olathe naviators tomorrow night. The final league game will be played in Bldg. 4 Tuesday night at 2000 between NTC and the Hospital, preceded at 1900 by a preliminary between the Waves basketball team and the Hospital Nurses.

9ND League Standings

	W	L
Olathe	8	1
NTC Great Lakes	6	1
USNH Great Lakes	5	4
Columbus	4	5
Glenview	3	6
Minneapolis	0	9

Robinson High

The Olathe-Hospital game was a close one until shortly after the start of the second half. The Corpsmen led, 30-27, at the half-way mark then turned on a burst of speed that handcuffed the visiting airmen. The third quarter score was 41-31, a lead the bandage-wrappers held for the rest of the game.

"Robbie" Robinson, tricky forward, paced game scoring with 21 points with tall Hospital mainstay Paul Traster not far behind with 16 markers. McAlister, Olathe scoring ace who leads 9ND scoring with a 23-point average per game, dropped to 15 points to lead the naviators.

NTC Wins Three

Finishing a three-game home stand before going on the weekend road trip, the NTC basketeers made it 18 wins against four losses last week by downing the Chicago College of Optometry, 62-41, edging the Glenview Yellowjackets for the second time, 48-41, and completely outdistancing the Herzel Collegemen, 73-24.

Glenview put up the closest battle of the three, leading the locals at the quarter, 14-10, and the half, 24-23. Center John Tosloskie and E. A. Lamb turned on the steam at this point, and the locals piled up a 37-30 lead in the third quarter and held the seven point lead to the end. Tosloskie scored 16 points and Lamb 12.

Sport Fans Find Facilities Four-O At Naval Hospital

Patients and personnel of the Hospital interested in sports are offered complete summer recreation facilities by the Hospital Recreation Department.

Under the supervision of Lt. E. W. Welch, MSC, USN, Recreation Officer, everything from archery to volleyball is available. Of particular interest is the huge indoor swimming pool which is sure to afford cooling relief from the heat. The 40 by 90 foot pool is open to all Hospital personnel daily from 1300 to 2030, being closed only on Friday.

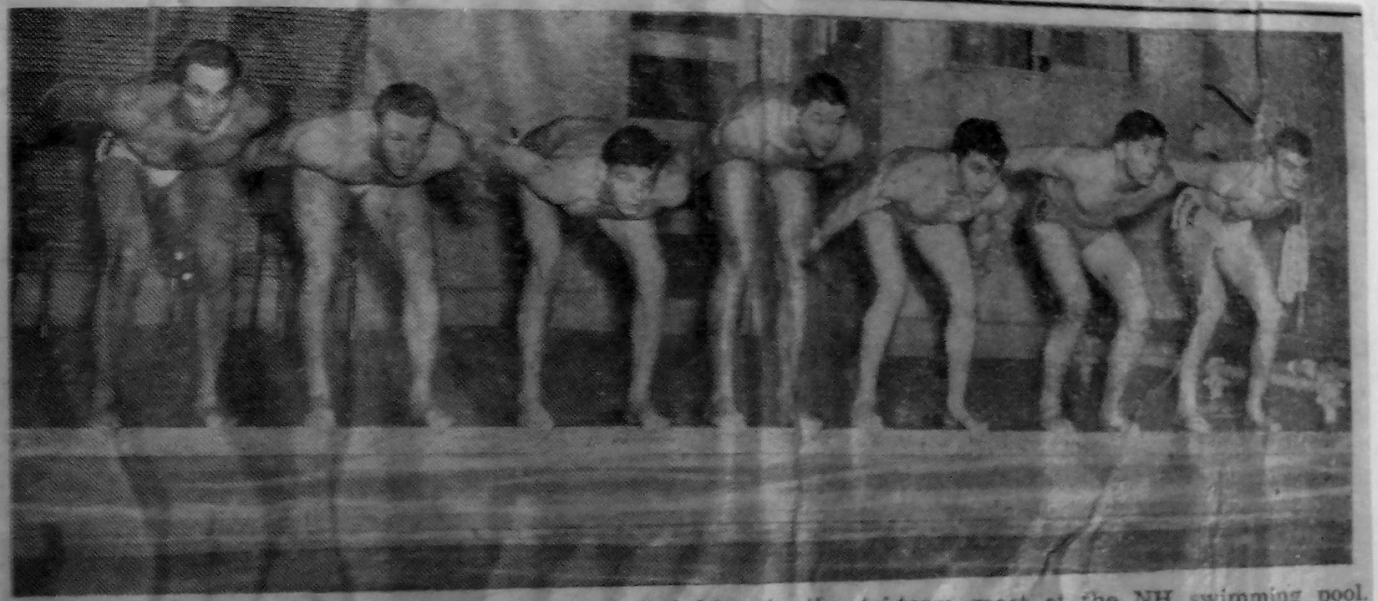
This year's aquatic program has gotten off to a good start with the "Splash Party" which was held for the staff recently. This novel experiment was enjoyed by all who attended, and plans for more parties of this kind are being made.

One of the few existing shortages at the pool at present is in the life guard department. Applications of qualified swimmers are being sought to fill the vacancies on the water safety staff.

In Bldg. 80, there are handball, badminton, and volley ball courts as well as the swimming pool and gym. Weight lifting apparatus has been obtained for the body-building enthusiasts. Also popular is boxing and wrestling at the gym.

Tennis addicts will be glad to know that the courts adjacent to Bldg. 82 have received a face lifting in the form of new nets and posts. The Pitch and Putt golf course in Camp Barry has been in operation since last Monday. Putters and balls can be drawn at the course from 1100 to 1600 Monday through Friday and from 0800 to 1200 on Saturday.

Two outstanding athletic events of the summer were recently announced by the Commandant of the Ninth Naval District. During the week of 19 June eliminations will be held at the Training Center courts for the District singles and doubles tennis squads. Entries are also desired from four member golf teams with an average of 8[illegible] less for the Glenview tourn[illegible] to be held 12 through 14



SOME OF THE STARTERS for the Hospital Dolphins in the tri-team meet at the NH swimming pool, bldg. 80, Tuesday, are pictured above, in tryouts. The Dolphin squad met swimming teams from Wilson and Wright Junior colleges in an afternoon event. It was the second meet of the year for the Hospitalites, their first being at Beloit. Left to right are **Marshall Goldberg, HM3**, Hospital swimming instructor and coach, **William O'Hare, HN, Don Erickson, HN, Louis Schneider, SA, William Howard, HN, Dave Mayo, SA**, and **Robert Nelson, SA.**

U.S. NAVAL HOSPITAL, GREAT LAKES, ILLINOIS

DATA CONCERNING HOSPITAL AT PRESENT

ACREAGE	95.39 ACRES
BUILDINGS	95
PERMANENT	28
TEMPORARY	67
BED CAPACITY	
AUTHORIZED	1050
MOBILIZATION	1687
CENSUS - AS OF 31 AUGUST 1953	
U.S.N., U.S.N.R. & U.S.M.C.	466
U.S.A. & U.S.A.R.	133
U.S.A.F.	34
SUPERNUMERARIES (EXCEPT DEPENDENTS)	24
DEPENDENTS	63
INFANTS	18
	TOTAL-738

MILITARY POPULATION IN THIS AREA DEPENDENT UPON THIS HOSPITAL FOR SUPPORT.

U.S. NAVY	13,576 ACTIVE	5,000 DEPENDENT
U.S. ARMY	11,900 ACTIVE	7,000 DEPENDENT
U.S. AIR FORCE	2,168 ACTIVE	1,100 DEPENDENT

SEPTEMBER 1953

U.S. NAVAL HOSPITAL, GREAT LAKES, ILLINOIS

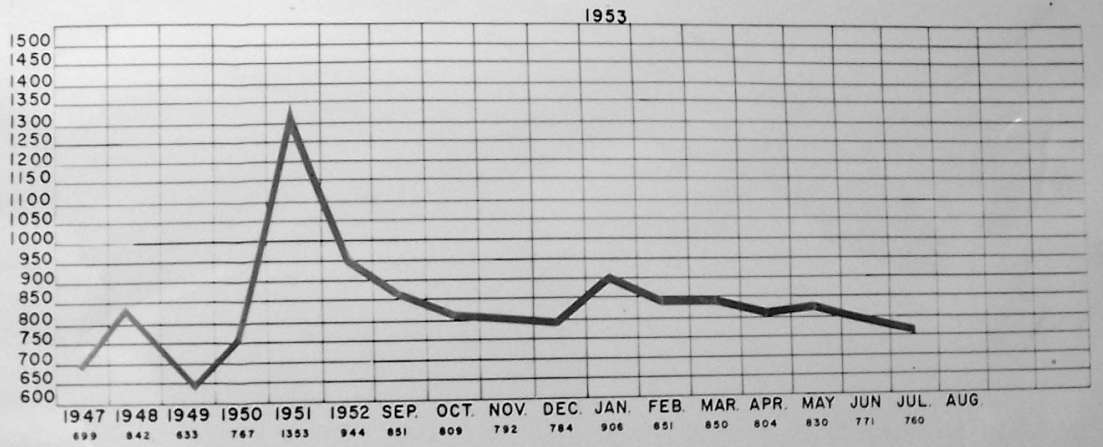
PERSONNEL DATA

OFFICERS	ALLOWANCE	ON BOARD
MEDICAL OFFICERS	74	77
DENTAL OFFICERS	7	9
MEDICAL SERVICE CORPS OFF.	7	9
NURSE CORPS OFFICERS	112	76
CHAPLAINS	4	3
CIVIL ENGINEER CORPS OFFICERS	1	1
WARRANT OFFICERS	6	5
ENLIST PERSONNEL	356	409
CIVILIAN PERSONNEL		
IVB	107	106
NON IVB	230	225
TOTAL	904	920

SEPTEMBER 1953

U.S. NAVAL HOSPITAL, GREAT LAKES, ILLINOIS

PERTINENT STATISTICAL DATA, AVERAGE CENSUS



DEPENDENTS

AVERAGE INPATIENT CENSUS PAST CALENDAR YEAR		DAILY AVE. NO IN PATIENTS	DAILY AVE. NEWBORNS	AVE. NO DAILY OUT PATIENTS TREATMENTS
SEPTEMBER	1952	81.8	23.9	181.5
OCTOBER	1952	83.9	18.5	201.7
NOVEMBER	1952	71.8	19.9	166.9
DECEMBER	1952	71.3	21.4	166.7
JANUARY	1953	76.5	16.5	171.3
FEBRUARY	1953	73.2	18.5	166.0
MARCH	1953	76.5	16.2	194.2
APRIL	1953	68.0	14.7	192.5
MAY	1953	74.3	16.2	179.9
JUNE	1953	73.6	17.1	200.8
JULY	1953	68.6	15.9	189.7
AUGUST	1953	60.9	18.2	193.8

SEPTEMBER 1953

MISSION, FUNCTIONS, ORGANIZATION AND OPERATION OF THE U.S. NAVAL HOSPITAL GREAT LAKES, ILLINOIS

The U. S. Naval Hospital, Great Lakes, Illinois, is the only Naval Hospital in the Ninth Naval District. It is also the only large military hospital in the Great Lakes area. Our primary mission is to provide hospitalization and specialized medical treatment and diagnosis for the service personnel, including members of the Air Force and Army, and their dependents in this area. Our secondary mission is the training of medical officers, nurses and hospital corpsmen. In this connection, on the grounds of the Naval Hospital, as a separate command under the Commanding Officer of the Naval Hospital, is the U. S. Naval Hospital Corps School whose primary mission is that of training hospital corpsmen.

Historical Data. (Chart 1):

The U. S. Naval Hospital, Great Lakes, Illinois, was commissioned on 2 October 1911, the original plant consisting of five buildings The original bed capacity provided space for 80 enlisted men and 9 officers. World War I brought about a great expansion in buildings and bed capacity. World War II brought about a further expansion, with a peak hospital census of 8,179. Of that number, bed space for 4,000 was provided at the present site, the additional bed space was furnished by temporary buildings erected at Camp McIntire and Camp Lawrence on the grounds provided by the Naval Training Center. Following the demobilization, Camp McIntire and Lawrence were decommissioned and turned over to the Downey Veterans Administration Hospital, and many World War I structures on the original reservation were razed.

Data concerning the hospital at present. (Charts II and III).

The reservation of the U. S. Naval Hospital, Great Lakes, adjoins that of the Naval Training Station and comprises 95.39 acres. We have 95 buildings on the reservation, of which number 28 are permanent and 67 are temporary. Attention is invited to the size of the reservation as well as to the 67 temporary buildings which we have, as these buildings were built in World War II, are of frame construction and require much maintenance. Eight of these temporary buildings are assigned to the Hospital Corps School.

The census as of 31 August 1953, was 738, made up as follows:

USN, USNR, USMC and USMCR	466
USA and USAR	133
USAF and USAFR	34
Supernumeraries (except dependents)	24
Dependents	63
Infants	18

This hospital provides support and specialized medical services for over 40,000 active service personnel and their dependents made up at present as follows:

U. S. Navy	13,576 active	5,000 Dependent
U. S. Army	11,900 "	7,000 "
U. S. Air Force	2,168 "	1,100 "

Work Load During the Past Twelve Months (Chart IV)

The work load of the U. S. Naval Hospital for the twelve-month period ending 31 August 1953, is as follows:

Patients admitted	12,463
Patients discharged	12,591
Korean Casualties Received	438
Clinical Boards	382
Medical Survey Boards	523
Deliveries	2,337
Deaths	101
Autopsies	113
Separations from the Service	764
Out-Patient Treatments	88,443
Physical examinations	2,366
X-Ray (includes photofluorograms	29,977
Laboratory examinations	240,234
Special Court Martials	40
Summary Court Martials	52
Mast Cases	436

Average length of patient stay----23.8.

Significant figures in this work load are the fact that 12,463 hospital patients were hospitalized, 2,337 deliveries were performed, and 88,443 out-patient treatments were given. In addition, 29,977 x-ray examinations were performed, and 240,234 laboratory examinations. Of significance in affecting our work load quite apart from the immediate care of the sick and injured, is the fact that 382 clinical boards were held and 523 boards of medical survey, making a total of 905 cases that appeared for disposition and 764 patients were separated from the service from our separation center. Physical examinations were given to 2,366. Attention is invited to the fact that the examinations in the large part are those of personnel who connection with the hospital and are in addition to that are performed on our regular hospital patients.

These consist primarily of quadrennial physical examinations of naval reserves, physical examinations of personnel on the temporary retired list to determine whether they should be retained on the retired list, or returned to active duty, examination of F.B.I. personnel, examination of Naval R.O.T.C. students, etc. These collateral duties that are inherent in the functions of a Naval Hospital all require additional personnel, and personnel assigned these functions are not strictly performing duties that have to do with the care of the patient as such. Attention is also invited to the fact that 436 personnel appeared at the Commanding Officer's mast, 52 summaries were awarded and 40 special court martials. Command function of preserving discipline also requires personnel whose functions primarily are not of caring for the sick and injured.

Personnel Data (Chart V)

As of the present time, personnel allowances and number on board are as follows:

Officers	Allowance	On Board
Medical Officers	74	77
Dental Officers	7	9
Medical Service Corps Officers	7	9
Nurse Corps Officers	112	76
Chaplains	4	3
Civil Engineer Corps Officers	1	1
Warrant Officers	6	5
Enlisted Personnel	356	409
Civilian Personnel		
Class IV-B	107	106
Non IV-B	230	225
GRAND TOTAL	904	920

Our personnel problems at present deal primarily with the shortage of nurses, and the great recent reduction in our civilian allowance. There is an increasing shortage of nurses throughout all naval hospitals. The same thing is true, I believe, in other military hospitals. This is a reflection of the shortage of nurses that exists throughout the country which is due to an insufficient number of graduates being turned out from nursing schools.

The second big problem dealing with personnel deals with the staffing ratio as laid down by the Bureau of the Budget. The Bureau of the Budget has made a ruling to the effect that in military hospitals there can be no more than 112 personnel for each 100 patients. In spite of our recent reductions in civilian personnel, we still, at the present time, are over the staffing ratio allowed by the Bureau of the Budget. Our present staffing ratio is 121 total personnel to 100 patients. Staffing ratios, as applied to hospitals, are fallacious in this sense. They simply represent a number which is arrived at by dividing the total number of attending personnel, including all military personnel, doctors, nurses, hospital corpsmen, medical service corps officers, dental officers, Chaplains, civilian employees, etc., by the number of patients occupying beds at that present moment.

The Bureau of the Budget has ruled that the total census of the hospital could not be used, and that the figure that must be used for the computation is that of the beds occupied which excludes patients on leave. Very obviously, when the patient load is low as ours is at the present time, the staffing ratio is high, and when the patient load is high as it usually is during the winter time during the upper respiratory season, the staffing ratio is more favorable. Chart No. VI shows the staffing ratios for the past twelve months.

Quite apart from the patients being taken care of at one time, it seems reasonable to suppose that a hospital such as ours, with a bed capacity of 1056 should be staffed to take care of the average number of patients expected during the year, whether at any particular time the census is below that figure or not. Hospitals must be prepared to take care of any number of emergency cases at any time and the staffing should never be based on the minimum census during the twelve month period. Chart No. VII shows the census for the past year and the preceding several years.

It is doubtful that this hospital, with the present number of patients, can ever carry out its mission with the staffing ratio as low as that set by the Bureau of the Budget. This is due to the type of construction of this hospital with many temporary wards scattered out over a large area. At this hospital, due to the wide dispersion of the buildings, it is necessary to transport patients by ambulance to take them to the operating room, Eye, Ear Nose and Throat Clinic, physio-therapy, and in some instances, to occupational therapy. Similarly, it is necessary to transport food from our centrally located mess hall to various wards where those patients aren't able to come to the mess hall. Over three miles of roads and six miles of sidewalks have to be maintained. This dispersion, of necessity, requires a much larger maintenance force with an increased number of chauffeurs and drivers and maintenance people in general. Quite apart from the increased number of personnel required, is the inconvenience to the patient during wet and inclement weather of being transported from one building to another. A few of our temporary buildings date back to World War I, most of them date back to

World War II. They are becoming old and require much maintenance.

Another factor which operates to our disadvantage in computing staffing ratios is the fact that we are in the housing business. We operate fifty-two sets of public quarters, in addition to the large nurses barracks. All the officers and men who occupy these quarters pay rental allowance for them and are entitled to fair and decent maintenance. The U. S. Treasury last year collected $156,000.00 in rental allowances from the people occupying these quarters. The additional personnel required for this extra maintenance work are all computed against our staffing allowance. The maintenance problems in a hospital such as this could not be compared with those of a modern hospital such as Bethesda, where the buildings are new and modern and where all facilities are centrally located.

New Construction:

Many of the problems we have in connection with maintenance could be taken care of if a new modern hospital were built. Plans are now under way in the Bureau of Medicine and Surgery and the Bureau of Yards and Docks for the construction of such a building. It has been determined that the requirements of this area are such that this hospital will be a 700 bed hospital on a 1,000 bed chassis. This decision was made by joint agreement between the Bureau of the Budget, the Armed Forces Medical Policy Committee, Bureau of Medicine and Surgery and the Bureau of Yards and Docks. At the present time, appropriated funds of $3,685,000. appropriated by Public Law 155, 82nd Congress are available. This money was appropriated for the specific purpose of building a temporary addition to this hospital and a 500-bed ward building. The Bureau of the Budget held up the releasing of these funds until plans for a permanent construction were available. At the present time, the Bureau of Medicine and Surgery and the Bureau of Yards and Docks are drawing up plans for the 700-bed hospital on a 1,000 bed chassis, utilizing currently approved uniform basic hospital plans modified for the site adaptation. A request for additional funds for the cost of construction will be made next year in the Navy Department Public Works Program, and it will be necessary at that time to re-program the $3,685,000.00, which is now available. It has been estimated that the total cost of this building will be in the neighborhood of $10,000,000.00. This area certainly needs a new Naval Hospital, inasmuch as this is the only Naval Hospital in the Ninth Naval District and supplies the needs of the Army and Air Force in this area as well. A new modern building will greatly reduce the cost of operation and should pay for itself in a period of ten to twenty years, in reduced maintenance costs.

Cost of Operation:

The total cost of operation for the hospital during fiscal year 1953 was $5,230,112.00, and the total cost of operating the hospital corps school was $732,461.00. These figures include cost of military pay. The average total cost per patient day for the 3rd and 4th quarters of the past fiscal year was $14.22 A breakdown of these costs by departments is shown on Chart No. VIII.

Hospital Corps School:

The Hospital Corps School which exists as a separate command under the Commanding Officer of the Naval Hospital is a Class "A" Hospital Corps School whose mission is to train Hospital Corpsmen for the U. S. Navy. The Hospital Corps School has approximately 500 students enrolled. The training period is twenty weeks. Ten classes are continuously in operation; a class is graduated every two weeks. During the past calendar year, 1,200 students were graduated.

CONCLUSION:

The U. S. Naval Hospital, Great Lakes, Illinois, is the only Naval Hospital in theNinth Naval District.Its mission is to provide hospital services including specialized medical service and diagnosis for all service personnel, including Army and Air Force and their dependents in this area. It has been estimated that the number of service personnel and their dependents in this area is roughly 40,000. Because of geographical location, wide dispersion and temporary construction of our buildings, and because of the many sets of public quarters requiring maintenance, this hospital will have difficulty carrying out its mission if the total personnel is reduced to meet the present staffing ratios laid down by the Bureau of the Budget. A NEW PERMANENT HOSPITAL IS URGENTLY NEEDED.

Rotating internships covering a period of twelve months are provided at this hospital in accordance with current directives of the Bureau of Medicine and Surgery. The annual schedule for each intern reporting for duty is prepared by the Director of Training and submitted to the Graduate Training Committee, the Director of Training is granted authority to modify any intern's training schedule on the various services to the extent that it will conform to the requirements of the State Board of Medical Licensure for rotating internship of the state in which he plans to take examinations for his license to practice medicine.

An Intern's Journal Club has been established for each group of interns reporting for duty and one-hour meetings are conducted weekly. Attendance of interns at the Journal Club Meetings is compulsory, except for instances of bona fide emergencies which may recuire their presence elsewhere. Each intern is required to submit reports on current medical literature and special topics of modern medicine, surgery and their sub-specialties, in rotational assignments.

All interns maintain a carefully prepared log or diary of all their professional activities throughout their intern year, and render an itemized account of their work on each service to the chief of service for each month or fraction thereof.

All interns attend all autopsies unless specifically excused by the chief of service with whom they are on duty. They also are placed on a rotational basis on an Intern's Watch List to serve with and under the direction of the medical officer of the day from 1630 to 0800 except weekends when they serve from noon Saturday until 1000 Sunday and 1000 Sunday until 0800 Monday. Each intern stands the intern watch duty every other night in accordance with the directive of the Surgeon General.

Each chief of service formulates and maintains a training program of high standards for the interns who are assigned to his service. The schedule is planned to meet the requirements of the Bureau of Medicine and Surgery and of the Council on Medical Education and Hospitals of the American Medical Association, as well as any variance which the Graduate Training Committee may designate. Residents and ward medical officers indulge actively in the indoctrination and professional training of interns, and free use is made of bedside small-group teaching, as well as didactic and audiovisual aids. Reasonable ample time is afforded the interns for proper anamnesis, physical examinations and special investigations of clinical interest. An effort is made not to require an excessive number of histories and physical examinations per day since this is not considered conducive to thoroughness and reliability.

The Director of Training, Captain M. W. ARNOLD, MC, USN, acts as counsellor for interns and as Senior Member of the Intern Training Committee, to direct the professional affairs of interns, to hear grievances and to notify the Graduate Training Committee of important problems.

Each chief of service prepares a fitness report for each intern who performs duty on his service, covering each month of service or fraction thereof.

There were two interns who completed their rotating internship in December 1950, and twelve interns completed their rotating internshi on 1 July 1951. All were issued official certificates by the Bure of Medicine and Surgery. Each one presented a formal paper at staff conference at some time during his period of internshi basic requirements of BuMed for rotating interns were made. terns took examinations for and were successful in entering th Navy Medical Corps.

Hospital Staff and Patients Fed By Civilian Commissary Dept.

Did you know that some Navy galleys function without Navy commissarymen? At Great Lakes Naval Hospital, in one of the largest food service installations under the management control of the Bureau of Medicine and Surgery, civilians perform the traditional duties of the Navy ship's cook, baker, and steward.

The Hospital's commissary officer, Lt. (jg) John H. Bing, SC, USN, states that this is nothing new. Civilian employees have long been the backbone of hospital commissaries, although they have had civil service status only since 1939.

Institutional food service is big business. Mrs. Mildred Roshanka, commissary accountant, reports that the Hospital's grocery bill for 1948 was $627,934.90, and that more than 1,000,000 meals were prepared and served to the Hospital staff and Hospital Corps School personnel during that period.

Steinhauer Is Head Civilian

Steward Edward E. Steinhauer is senior supervisor of the 128 civilians in the commissary service, and, next after the commissary officer, is responsible for the operation of the department.

Many years a cook, baker, butcher, and steward, Steinhauer has a vast knowledge of institutional feeding. A knowledge attested by the numerous phone calls he receives daily from people, both in and out of the department, who seek information or advice about food. And questions come by mail as well. Like a recent letter from a seagoing ship's cook who asked: "Saw your Christmas menu and thought it was swell . . . but one thing puzzles me. Just what is that 'Cream of Salsify' soup? No one on the ship seems to know either."

Other civilians hold down key jobs also. Chief butcher Orval Meredith supervises the meatcutting in the Central butcher shop, and chief baker Carlton Hagstrom has charge of the baking of all rolls and pastries served at the Hospital.

Three chief cooks direct the actual cooking operations. Joseph West, a commissary employee since 1918, supervises the cooks at the corps school galley in Bldg. 106. Alex Kroll is head chef at the nurses' galley, Bldg. 14, while senior civilian in the main Hospital galley, is Norman Hansen, who gained his cooking experience in well known establishments of the surrounding area.

Grilled Steaks

A food service innovation is the Hospital mess halls, which has drawn favorable comment from inspecting officers, is the practice of grilling steaks, chops, eggs, and hot cakes on the serving line. To further eliminate the time lag between cooking and serving, Hospital cooks carve roasted meats and poultry on the mess line, in the fashion of civilian cafeterias.

Patients who are unable to come to the mess halls are served meals in the wards from electrically heated food carts loaded in the main galley. An average of 1,200 meals are served to ward patients daily.

Fresh milk is served in the mess halls twice daily, at breakfast and supper. Each bed patient is allowed a quart of milk each day and more if his doctor wants him to have it. In addition, chocolate milk and fresh orange juice are available for between-meals nourishment.

Plank Owners

The Hospital's records belie the commonly accepted belief that culinary employees are essentially transient employees. Mrs. Edna Puckett, in charge of the commissary personnel work, reports that the following employes have more than 15 years of service at Great Lakes: Catalino Edmalin, Victorino Daelto, Sixto Ridao, Santiago Vallejo, Juan Velasco, and Harry Raff. Mr. West, Mr. Kroll, and Mr. Steinhauer have been with the Hospital over 25 years.

In this predominantly civilian organization, Navy hospital corpsmen still play an important part. Hal W. Freeman, HMC, and Norris E. Zentner, HM1, are in charge of the main and corps school galleys, respectively. Paul J. Grauer, HM2, is assistant to the commissary officer in Bldg. 81. Six non-rated men perform important duties as mess hall master-at-arms, and as drivers of the big trucks that keep the galleys and storerooms supplied with food.

The Diet Kitchen

The diet kitchen, although a part of the commissary department, is under the general supervision of Lt. Virginia Bates, NC, USN. She is assisted by Lt. Dorothy O'Neill, NC, USNR, and Lt. (jg) Alice Van Gundy, NC, USNR. These three Navy Nurse Corps officers are responsible for the preparation of all special diets.

The art of diet therapy, like so many others of the present adjuncts to medicine, has greatly enlarged its scope in the past 10 to 15 years. This has necessitated the special training of members of the Navy Nurse Corps, which up to this time has included a nine months' course at George Washington University at Washington, D. C.

Meat and Potatoes

In making out a Naval hospital menu the customary staples of the American diet, meat, bread and potatoes, are given the major consideration. Unbelievable as it may seem, some foods served at the Hospital, which are tasted, or at least looked at, for the first time by many of the younger patients and staff members are avocados, broccoli, brussel sprouts, celery or Chinese cabbage, egg plant, endive, escarole, kale, romaine, oyster plant, scallops, tangerines and fresh apricots.

The most popular dish served is grilled beefsteak. The most unpopular foods served at the Hospital, according to a recent survey of patients in civilian institutions, are read lamb and fried beef liver.

If imagination was the only contributing factor in planning an institutional menu, artists, poets . . . creative authors would be the best commissary men. Unfortunately other things help determine what is to appear on the serving line. A menu planner with imagination must still consider adequacy, variety, combinations, seasonal availability of foods, delivery dates, food likes and dislikes of personnel, capacity of galley equipment, availability of pocks, and last, but by no means last, the cost of the items to be served.

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View of the Special Diets Kitchen

"D" Street with archway between Wards 74 South and 75 East; Ward 83 North is to the near right.

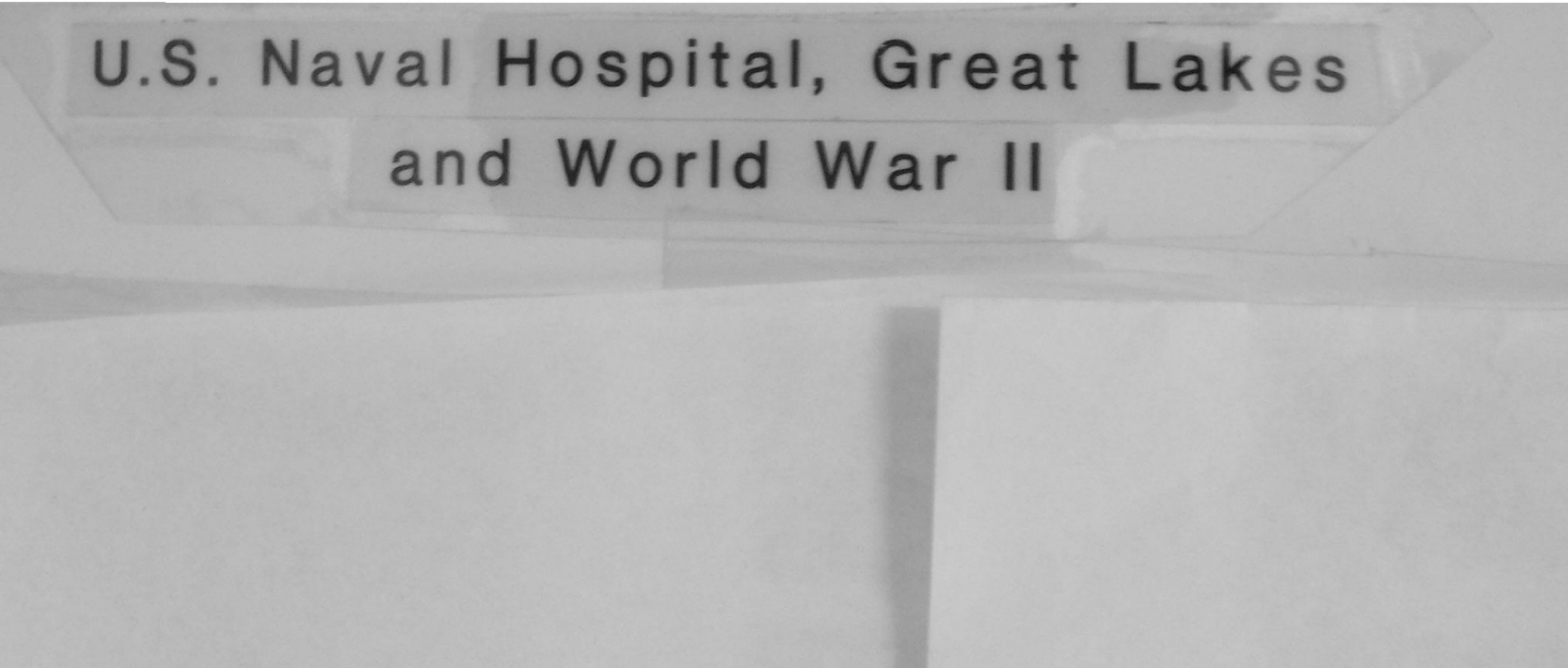
Great Lakes Bulletin
June 23, 1950.

NSD, Naval Hospital Presented Secretary of Navy Safety Award

At ceremonies held this week the Naval Supply Depot and the Naval Hospital at Great Lakes were awarded the Secretary of the Navy Award for Achievement in Safety. This award was established in March of 1947 by SecNav as a form of personal recognition for outstanding performance in the field of accident prevention.

According to Mr. J.F. Moto, Safety Inspector for the Naval Supply Depot, the award is figured on a percentage of accident frequency of all Bureau of Supplies and Accounts activities throughout the Navy. When total figures are averaged, all commands with fewer accidents than the Navy-wide average are in line for the award. The certificates received by NSD and the Hospital are not many, but are of few such awards made annually.

A reduction of 59 percent in lost-time accident frequency rate and an 86 percent reduction in severity rate for the year 1949 as compared with the year 1948 won the award for the Naval Supply Depot. The Hospital's award was presented for a 42 percent reduction in lost-time accident frequency rate and a 90 percent reduction in severity rate for the same period.


U.S. Naval Hospital, Great Lakes
and World War II

Statistics

1941: With the beginning of World War II there were 533 patients admitted to the hospital. The daily average census was 417. There were 7489 patients admitted that year of 7379 discharged. There were 322 staff members- 40 officers, 236 enlisted men, and 46 nurses.

1942: The daily average census was 1307. Of that 1300 were active duty and 7 were dependents. 24,373 patients were admitted and 23,111 discharged that year. There were 890 staff members-90 officers, 675 enlisted men and 125 nurses.

1943: The average daily census was 2549. All but 12 would be active duty. 38,383 were admitted that year and 36,493 were discharged. There were 1414 staff members- 132 officers, 1009 enlisted personnel, and 283 nurses.

1944: Average daily census was 3666. 39,070 were admitted and 39,784 discharged. There were 1607 staff members- 122 Medical Officers, 13 Hospital Corps Officers, 6 Wave Officers, 289 Nurse Officers and 1177 enlisted personnel which included 162 WAVES.

1945: Average daily census was 6894. 61,363 were admitted and 58,139 discharged. There were 1650 staff members.

1946: Average census was 3569. The highest census in the hospital's history was 8 January 1946 when it was 8763- 7653 on board and 1110 on convalescent leave. 26,350 were admitted and 32,207 were discharged. Of those admitted 24,149 were active duty and 2,207 were dependents (by this time the Dependent's Unit Hospital was in use, prior to this dependent patients were sent to Wharton Memorial Hospital at Northwestern University). Of those discharged 23,770 were returned to duty; 3258 were transfered to other hospitals or activities; 2803 were invalid (discharged from the service for medical reasons); 46 died and 32 declared deserters. 943 were aboard 31 December 1946. There were 1608 staff.

1947: There were 6605 patients admitted that year and 6403 discharged. The average census was 682, but that fluxuated greatly. The staff had decreased to 409.

Major emphasis was placed on rehabilitation, both mental and physical. the neuro-psychiatry department was well developed and became noted for their treatment of combat veterans. The Physical Therapy Department was extremely busy, taking care of simple sprains to rehabilitation of amputees. Neuro-surgery and plastic surgery was added to the surgery service and the hospital was designated a prosthetic eye center. A specialist, a dental officer and Wave technician was assigned to the command. Occupational therapist provided patients with woodworking, painting, weaving and ceramics.

Besides treating the sick and injured, the hospital played a major role in training doctors, nurses and ancillary personnel. Many of the medical and nursing officers, specialist in their fields in civilian life, became reservists who were in the military for the duration of the war. Great Lakes was a major indoctrination center. Hospital Corpsmen and WAVES were trained here. In the Spring of 1945, Great Lakes was designated as one of the military hospitals for the training of nurses enrolled in the Cadet Nurse Program. The course was to last 6 months, but was termintated after the first class graduated due to the end of the war. The same happend for a school for WAVES.

The patient census was the highest the last year of the war when the fighting was the heavist. Upon receiving treatment from the hospital, the large majority were returned to duty or discharged from the service. As the war ended the census decreased and the hospital deesculated into a peacetime medical facility, though war casulties were still aboard. In 1947 the rest of the war casulties were transfered to the VA hospital and Great Lakes treated the normal standard of patients as well as dependents. In 1946 the Gym and indoor swimming pool was open. Many buildings were torn down. With The beginning of the Korean Conflict, Great Lakes prepared for a large patient census and received a number of casulties from that undeclared war.

BUMED set up a program of evacuating combat casulties from the Pacific theater directly from combat areas to the naval hospital nearest their homes, via the Receiving Hospital in San Francisco, which was charged with the distribution of the patients to the appropriate hospital. With nearly one-third of the total population of the Navy and Marine Corps recruited from the Ninth Naval District, the hospital at Great Lakes was the destination of a large number of these casulties. Trains were used to transport the wounded and Chicago was the railway center of the nation. Also many navy and army personnel from the Atlantic theater was treated at Great Lakes.

World War II was unique in the fact that the hospital received more press coverage in the local and Chicago media then the Great Lakes Training Center itself. In WWI the base was the focus of attention; the training of new sailors and their social activities. But in WWII more attnetion was given to the wounded veteran, who was a patient in the hospital at Great Lakes. The exploits of an individual patient wounded in action was popular as well as the visits of famous people and others who visited the wounded. Many of these articles were syndicated nationally.

There was an exceptionally well organized Welfare and Recreation Department established in the hospital during the war. Recreation and entertainment were a priority- "mental attitude was important to a person's reaction to their ailment or wound." It was very easy for patients to become bored, whether a recruit with pneumonia or a combat veteran with severe shrapnel wounds. Tours were organized for civic groups such as Red Cross, American Legion and the Gray Ladies to visit patients bringing small gift and support. Chicago was a major city for entertainment and stars from the movies, stage and radio would take the hour trip to Great Lakes to visit the patients. Jimmy Durante, Kate Smith, Susan Hayward, and Jack Benny, who was raised in Waukegan and was a recruit at Great Lakes in WWI, were a few who visited and entertained both staff and patients on the wards and in the theater which had been recently constructed on the hospital compound. With a census between 4,000-6,000, the American Herald Tribune newspaper donated $5.00 to each patient. Parties were held on the wards to keep the patients involved. "Funfest for Wounded Vets" provided such events as wheelchair races, diaper changing contests, balloon breaking contests (hugging a woman with a balloon between the two), and the famous doughnut dunking contest which tested who could eat the most doughnuts in the shortest period of time. A hospital orchestra and various singing groups were put together of both staff and patients and performed on the wards. Three movies a week were shown throughout the hospital and countless volunteers came to write letters, talk and show the paitents people cared.

World War II had a dramatic effect on the U.S. Naval Hospital at Great Lakes. Prior to the war the hsopital had been reduced to a small naval medical activity. But with the United States involvement in a two front war, a high casulty rate was forseen and the hospital rapidly expanded. An intensive building program was started and new buildings were constructed on the hospital compound and other buildings were repaired. Much of the vacant land within the hospital reservation was used for construction sites and many of the streets and roads were repaved and widened and the sidewalks redone. New steamlines were installed and the hospital aquired new x-ray equipment. A new bridge was constructed over the ravine to the west of the compound and a road built to a new hospital gate connecting the hospital with Sheridan Road. Prior to this traffic had to go through the main gate and across the bridge next to Building 81-H in order to reach the hospital compound. The railroad tracks were repaired as many of the supplies and wounded patients were brought to the hospital via railroad. As the war progressed buildings from mainside and the Recruit Training Command were used to house patients. The Drill Hall in Camp Lawrence (RTC) was added increasing the hospital's recreational and rehabilitation facilities. With the extremely high turnover of patients and staff, the personnel and record office became so active that it was moved from the main hospital building (1-H) to 4 separate buildings nearby.

In 1944, by order of the Secretary of the Navy, the Naval Hospital was designed a subordinate command under the Naval Training Center in matters of administration and security, though the hospital retained its identity as a Naval Hospital in relation to the Bureau of Medicine and Surgery (BUMED). The hospital security force was replaced by NTC, thus releasing at least 100 billets for the hsopital to utilize for patient care.

The hospital provided health care to military assigned to the Training Center, recruits, students and staff, though branch dispensaries were not underthe hospital's jursidiction. Also cared for were active duty personnel from the increased Ninth Naval District activities, Naval Air Technical Training Center (Glenview), and Navy Department activities throughout the district such as recruiting stations. Great Lakes contracted the use of 512 beds at the Wharton Memorial Hospital at Northwestern University for dependents. In December 1945 the Dependent's Unit Hospital (Building 38-H) was opened next to the main building (Building 1-H).

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